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COR AMND/RESTATE/CORRECT OR O/D RESIGN
MASTER FOOD SERVICE CORP

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AUG 2 8 2013

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MASTER F	OOD SERVICE	CORP	
DOCUMENT NUM	BER: P120000320	38		
	of Amendment and fee are su			
Please return all corre	spondence concerning this ma	tter to the following:		
	JAVIER BANOS	ESQ		
		Name of Contact Person	D	
	LAW SERVICES			
		Firm/ Company		
	1500 BAY ROAD			
		Address		
	MIAMI, FL 33145			
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For further information	on concerning this matter, pleas			
JAVIER BANOS ESQ at (786 ) 303-5010				
Name of Contact Person Area Code & Daytime Telephone Nu			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle				
		Tallahassee, FL 32301		

FROM LAW\_OFFICE

(TUE) AUG 27 2013 17:43/ST. 17:43/No: 7381197638 P 3

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**Articles of Amendment** to Articles of Incorporation

FILED

13 AUG 27 AM 9: 57

## MASTER FOOD SERVICE CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

SEGNETARY OF STATE TALLAHASSEE, FLORIDA

P12000032088

nt(s) to

(Document	t Number of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Florida Pro	fit Corporation adopts the following amendme
A. <u>If amending name, enter the new na</u> MASTER SERVICES INT		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associat	ation "Corp," "Inc," or "Co". A pr	any," or "incorporated" or the abbreviation ofessional corporation name must contain the
B. <u>Enter new principal office address, i</u> (Principal office address <u>MUST BE A ST</u>		<u> </u>
C. Enter new mailing address, if applied (Mailing address MAY BE A POST (  D. If amending the registered agent an	d/or registered office address in Flor	rida, enter the name of the
new registered agent and/or the new	Andrea Volf	
NOME OF IVEW REGISTER A SEM	1500 Bay Road	
	(Florida street address)	
New Registered Office Address:	Miami Beach	, Florida 33139
,	(City)	(Zip Code)
New Registered Agent's Signature, if ell I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar with and ac chairne of New Registered Agent, if ch	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>

## FROM L'AW\_OFFICE

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u> s	e Jones	
X Add	SV Saily	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PTS	ANDREA VOLF	1500 BAY ROAD
X Add	<u>- 197- ; 2194</u>		MIAMI BEACH,FLA.
Remove			
2) Change	P\$D	FRANK DÍAZ	1500 BAY ROAD
Add			MIAMI BEACH, FLA
X Remove			
3) Change	<del> </del>		<u></u>
Add		,	
Remove		·	
4)Change			
Add		•	<del></del>
Remove			
5) Change			·
Add			<del></del>
Remove			
6) Change			
Add			
0			

(Attach additional	adding additional Articles if necessary).	(Be specific)	<u>si nere</u> :		
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<u>provisions for i</u>	nt provides for an exchimplementing the americable, indicate N/A)	ange, reclassificati adment if not cont	on, or cancellation	of issued shares, lment itself;	
				· · · · · · · · · · · · · · · · · · ·	
			·		
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			· ·	,	

The date of each amendment(s) as date this document was signed.	doption: JULY 26, 2013	13 AUG 27	AM 9: 5.7if other than the
reace una discussione was signed.		SEGRETARY TALLAHASSE or amendment file date)	
	(no more than 90 days afte	r amendment file dute)	<del>L. FLORIO</del> A
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of ficient for approval.	f votes cast for the amendme	nt(s)
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting each voting group entitled to vote separa	groups. The following state at the state of	ement
"The number of votes east	for the amendment(s) was/were sufficient	t for approval	
by	(voting group)	**	
The amendment(s) was/were add action was not required.	opted by the board of directors without sh	areholder action and shareho	older
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareh	older action and shareholder	
Dated AUG	UST 27, 2013		
Signature	(0/bll		
selecto	d, by an incorporator – if in the hands of ted fiduciary by that fiduciary)	ectors or officers have not be a receiver, trustee, or other o	en ourt
	ANDREA VOLF		
	(Typed or printed name	e of person signing)	
	PRESIDENT		·
	(Title of perso	n signing)	