## P12000095835

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13 SEP 26 PM 2: 20
SECRETARY OF STATE

C. LEWIS

OCT 2 2013

EXAMINER

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: KOKOMO   BER: P1200009583		ORP.
	of Amendment and fee are su	bmitted for filing.	
	spondence concerning this ma	·	
	Eric N. Assouline	, Esq.	
		Name of Contact Person	n
	Assouline & Berlo	owe, PA	-
		Firm/ Company	
	9 NE 20th Ave		
		Address	
	Dania Beach, Flo	rida 33004	
	<del></del>	City/ State and Zip Cod	e
Wa	rren.ryllo@hotmai	Lcom	
		sed for future annual report	notification)
	is-mail address. (to be as	sed for rathre attitual report	nonication) .
For further information	n concerning this matter, pleas	se call:	
Warren Ryllo	)	<sub>st (</sub> 954	654-0147
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	lling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED

KOKOMO ICE CREAM CORP.

13 SEP 26 PM 2: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) P12000095835 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Warren Ryllo Name of New Registered Agent 230 SW 12TH AVE, SUITE 10 (Florida street address) POMPANO BEACH (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar without accept the obligations of the position.

Signature of New Registered Agent, if changing

## 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	<u>PT</u> <u>Johr</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>P, D</u>	Patricia Tancredi	9 NE 20th Ave
Add			#602
X Remove			Pompano Beach, FL 33441
2) Change	P, D	Warren Ryllo	230 SW 12th Ave
X Add			Suite 10
Remove			Pompano Beach, FL 33069
3) Change			
Add			
Remove			<del> </del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			··· <del></del>

tach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
		<u> </u>	
		,	
			_
·		<del></del>	_
on amandment provides for an area	<u>aange, reclassification, or </u>	cancellation of issued shares.	
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in	the amendment itself:	
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in	n the amendment itself:	
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rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in	i the amendment itself:	

The date of each amendment(s) a	September 24, 2013	FIL	if other than the
date this document was signed.	цорион.	13 SEP 26	
Effective date if applicable:			
	(no more than 90 days after amendment file	TALLAHASSE	UF STATE E. FLORIDA
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the ufficient for approval.	e amendment(s)	
	proved by the shareholders through voting groups. The foir each voting group entitled to vote separately on the amen		
"The number of votes cast	for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action	and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and	shareholder	
<sub>Dated</sub> Sept	ember 24, 2013		
Signature	ember 24, 2013		
(By a c	director, president or other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, trustented fiduciary by that fiduciary)		
	Warren Ryllo		
	(Typed or printed name of person sign	ing)	
	Sole Director and Preside	nt	
	(Title of person signing)		