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SECRETARY OF STATE DIVISION OF CORPORATIONS

V HERRING MAR 2 3 2017

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Mister	Food Gord			
DOCUMENT NUMBER: P12000103813				
The enclosed Articles of Amendment and fee are su	abmitted for filing.			
Please return all correspondence concerning this ma	itter to the following:			
Gis	Name of Contact Person			
M15	er tood Corp			
10701	San Bernardino Way			
Boc	a Raton, FL 33428			
	City/ State and Zip Code			
9150	aparra 66@ amail. com sed for future annual report notification)			
E-man address. (10 be u	sed for future annual report hourseation)			
For further information concerning this matter, pleas	se call:			
Gisela Parra	at (561) 4515941			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Department 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)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

to

	Articles of Incorporation	FILEO SECRETARY OF STATE
Mister	Food Corp	DIVISION OF CORPORATIONS
(Name of Corpo	ration as currently filed with the Florid	la Dept. of SELEMAR 21 PM 3: 16
	2000103813	. · · · · · · · · · · · · · · · · · · ·
	ocument Number of Corporation (if known	n) ·
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corpora	ation adopts the following amendment(s) to
A. If amending name, enter the new name of th	ne corporation:	·
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A professional o	The new incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>		<u>a farra</u> <u>San Bernard</u> ino W Rabio El 33428
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
D. If amending the registered agent and/or registered agent and/or the new register Name of New Registered Agent	GISUA Parra	<u> </u>
New Registered Office Address B	070 San Berna (Florida street address) cca Raton (City)	rdino Way , Florida 33428 (Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered age	Registered Agent: nt. I am familiar with and accept the obli	igations of the position.
	Sanature of New Registered Agent if cha	noine

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>	John Do	<u>e</u>			
X Remove	<u>V</u>	Mike Jos	nes			
_X Add	<u>sv</u>	Sally Sm	n <u>ith</u>			
Type of Action (Check One)	Title		Name		Address	
1)Change	<u>D</u>	_	Jaime	J Sancha	R 10701 San Benardina Boca Raton, FL 330	, U
Add					Boca Katon, H 330	128
Remove						
2) Change		_				
Add						
Remove						
3) Change						
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_		 		
Add						
Remove						
6) Change						
Add						
Remove						

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rovisions for i	nt provides for an e implementing the a licable, indicate N/A)	mendment if no	ification, or ca t contained in t	ncellation of issue ne amendment its	<u>d shares.</u> e <u>lf:</u>	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	•
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date valocument's effective date on the Department of State's records.	vill not be listed as the
Adaption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 03/08/17	
Signature Swelt and	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
<u> Gisela Parra</u>	
(Typed or printed name of person signing)	
President	
(Title of person signing)	