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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	CATION:	RME FAMILY DISCO	OUNT STORE INC		
DOCUMENT NUME	BER: P13000036459	<u> </u>			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corres	spondence concerning this matt	er to the following:			
	EDITH HILERME				
	Name of Contact Person				
		Firm/ Company			
	447 ACACIA TRE	E WAY			
		Address	-		
	KISSIMMEE, FL		_ _		
		City/ State and Zip Code	•		
edi	threstaurant@gma	ail.com			
	E-mail address: (to be use	ed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	e call:			
EDITH HILE	RME	ai (331	,746-0114		
Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment 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)		
Am Div P.O	iling Address endment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section in of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

EDITH HILERME FAMILY DISCOUNT STORE INC

(Name of Corporation as currently filed with the Florida Dept. of State) P13000036459 (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: EDITH RESTAURANT BAKERY INC 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. 104 S ORANGE BLOSSOM TRIAL B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ORLANDO FLORIDA 32805 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 ag ent and/or the new registered of fice address: Name of New Registered Agent (Florida street address) . Florida New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and 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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
() Change	D	YVENSON HILERME	447 ACACIA TREE WAY
Add			KISSIMMEE, FL 34758
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ial sheets, if necessar	ry). (Be specific)			
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	ent provides for an				- <u>-21</u>
provisions for	r implementing the	amendment if not	contained in the an		<u></u>
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provisions for	r implementing the	amendment if not			<u>-</u>
provisions for	r implementing the	amendment if not			23
provisions for	r implementing the	amendment if not			<u></u>
provisions for	r implementing the	amendment if not	contained in the an		
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The date of each amendment date this document was signed		, if other than the
Effective date if applicable:	05/07/2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
_	(voling group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated	5-7-14	
Signature/	Edith Hillamo	
	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
a	ppointed fiduciary by that fiduciary)	
	EDITH HILERME	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	