P1300051516

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	; #)
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13 OCT 28 MAILS

And

NOV 01 2013 R. WHITE

COVER LETTER

TO: Amendment Sect Division of Corpo				
NAME OF CORPOR	RATION: Imaginary F	Food Truck Corp		
	BER: P1300005757			
	of Amendment and fee are su			
Please return all corre	spondence concerning this ma	tter to the following:		
	Damon Cornelius	}		
		Name of Contact Person	1	
	Imaginary Food 1	ruck Corp		
		Firm/ Company		
	12717 Trucious F	Pl		
		Address	· · · · · · · · · · · · · · · · · · ·	
	Tampa, Fl. 33625	5		
		City/ State and Zip Cod-	e	
dar	manaarnaliya11@	hotmail com		
uar	moncornelius11@			
	E-man address; (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
Damon Corn	elius	_{a. (} 813	732-3475	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	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)	
Mai	lling Address	Street	Address	
	endment Section		Iment Section	
Division of Corporations		Division of Corporations		
P.O. Box 6327 Clifton Building				
Tall	ahassee, FL 32314	2661 E	xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FILED 13 OCT 28 AHII: 32

Imaginary Food Truck Corp

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of Corporation as currently filed with the Florida Dept. of	(State)	TALLAHAS.	SEE, FLORIDA
P13000057579			
(Document Number of Corporation (if known)			_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> oits Articles of Incorporation:	Corporation a	dopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corporation:			
			_The new
name must be distinguishable and contain the word "corporation," "company, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A profes 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, new registered agent and/or the new registered of fice address:	enter the nan	ne of the	
Name of New Registered Agent		_	
	_		
(Florida street address)			
New Registered Office Address: (City)	, Florida	(Zip Code)	-
(City)		(Zip Coae)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept	the obligation	s of the position.	
Signature of New Registered Agent, if changi	ng	-	

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:		John Doe	
X Change	<u>PT</u>		
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
1) Change	D	Michael A Vona Jr.	12717 Trucious PI
Add			Tampa, Fl. 33625
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

tach additional sheets, if nece,	ssary). (Be specific,	J		
				
				<u></u>
	<u> </u>	<u> </u>		
				_
			· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·				-
			 	
		<u> </u>		<u>. </u>
an amendment provides for	an exchange, reclass	ification, or cancell	ation of issued sha	res.
provisions for implementing	<u>the amendment if no</u>	t contained in the a	mendment itself:	
(if not applicable, indicate	? N/A)			
				
				_

The date of each amendment(s	s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	10/18/2013	_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement lfor each voting group entitled to vote separately on the amendment(s):	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_10/18	8/2013	
Dated_10/11		
Signature		
(By	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Damon Cornelius	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	