P130000183

| (Re | questor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



500284679055

04/20/16--01020--002 **43.75

K

APR 20 2016 R. WHITE 6 APR 20 PH 12: 06

Frantzy Joseph

3355 S kirkman Rd Unit 1

Orlando, FL 32811

Ph: 321-527-9804

Amendment Section

Division of Corporations

P.O.BOX 6327

Tallahassee, FL 32314

Re: Document #: P13000077182

This letter certifies that I have submitted an amendment to change the name of my corporation: Express Financial Tax Services Inc. to Kirkman Grocery Store Inc. my phone number is 321-527-9804 and return address is: 408 N. kirkman rd unit 1, Orlando FL 32811.

Sincerely,

Joseph, Frantzy

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | EXPRESS FINANC | CIAL TAX SERVICES IN | C |
|---|-------------------------------------|---|--|
| | 00077182 | · · · · · · · · · · · · · · · · · · · | |
| The enclosed Articles of Amenda | nent and fee are sub | mitted for filing. | |
| Please return all correspondence of | concerning this matt | er to the following: | |
| | | FRANTZY JOSEPH | |
| | | Name of Contact Person | l |
| | | Firm/ Company | |
| | 408 N. | KIRKMAN RD UNIT 1 | |
| | | Address | |
| | ORLA | ANDO, FL 32811 | |
| | " | City/ State and Zip Code | 2 |
| | JOSEP | H.FRANTZY@YAHOO. | COM |
| E-mai | l address: (to be use | ed for future annual report | notification) |
| For further information concerning | g this matter, please | e call: | |
| FRANTZY JOSEPH | | at (| 527-9804 |
| Name of Contact I | Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for the follow | ving amount made p | ayable to the Florida Depa | ertment of State: |
| | .75 Filing Fee & tificate 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) |
| <u>Mailing Addre</u> Amendment Se Division of Cor | ction | Amend | Address / ment Section on of Corporations |
| P.O. Box 6327 | | Clifton | Building |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

16 APR 20 PM 12: 06

EXPRESS FINANCIAL TAX SERVICES INC.

CEPRENTEY OF GIATE

| | | 製造 だぬれる とう とう ・12 ・ (1411) |
|---|---|--|
| (Name o | of Corporation as current | ly filed with the Florida Dept./of.State) LORIDA |
| P13000077182 | | |
| | (Document Number of | of Corporation (if known) |
| Pursuant to the provisions of section 607. ts Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new na | me of the corporation: | |
| KIRKMAN GROCERY STORE INC. | | . The new |
| name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or | on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the |
| B. Enter new principal office address, | if applicable: | 408 N KIRKMAN RD UNIT 1 |
| Principal office address <u>MUST BE A S</u> | | ORLANDO, FL 32811 |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 408 N KIRKMAN RD UNIT 1 |
| | | ORLANDO, FL 32811 |
| new registered agent and/or the nev | | ress in Florida, enter the name of the s: |
| Name of New Registered Agent | | |
| | 408 N KIRKMAN RD UI | · |
| | • | reet address) |
| New Registered Office Address: | ORLANDO | Florida 32811 |
| New Registered Agent's Signature, if cl hereby accept the appointment as regist | hanging Registered Agent ered agent. I am familiar | (City) (Zip Code) with and accept the obligations of the position. |
| | Q un- | V |
| | Signature of New I | 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 <math>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 Doe | | |
|-------------------------------|-------------|-------------|----------------------|--|
| X Remove | <u>v</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s | |
| 1) Change | | | | |
| Add | | | , , , , | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | , | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| 5) Change Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | | | |
| Add | | | | |
| Demove | | | | |

| attach additional sheets, if necessary). | (Be specific) |
|---|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, and and an angular state of the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, and and and an angular shares and an angular shares and an angular shares and angular shares angular shares and angular shares angular shares and angular shares angular shares and ang |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, and and an anger if not contained in the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| <u>provisions for implementing the ame</u> | ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date if applicable: | |
| (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 will necessarily document's effective date on the Department of State's records. | ot be listed as the |
| Adoption 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) | |
| (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 4-17-2-16 | |
| Signature hunn Ta | |
| (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) | |
| FRANTZY JOSEPH | |
| (Typed or printed name of person signing) | |
| CHIEF OPERATION OFFICER | |

(Title of person signing)