P1300086335

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C. GOLDEN: SEP - 1 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: YOEL FARMER'S	MARKET, INC.		
DOCUMENT NUMF				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	YOEL MAJIN			
		Name of Contact Person	1	
	YOEL FARMER'S MARKE	T, INC.		
		Firm/ Company		
	4595 SW 122TH AVE			
		Address		
	MIAMI, FL 33175			
		City/ State and Zip Cod	c	
olgati	.mr@gmail.com			
——————————————————————————————————————	= -	sed for future annual report	notification)	
		,		
For further information	concerning this matter, pleas	se call:		
OLGA TORRES		786	de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	the following amount made	payable to the Florida Depa	artment of State:	
S35 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			Address	
	ndment Section	Amendment Section		
	sion of Corporations Box 6327	Division of Corporations Clifton Building		
	hassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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YOEL FARMER'S MARKET, INC	-17 . 3 . 1 . V.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P13000086335	-
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	12320 SW 56 ST
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI. FL 33175
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 adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	ut:
I hereby accept the appointment as registered agent. I am familiar	
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>	John Do	<u>oe</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>	Address	
i) Change	VP		YAMIR HERNANDEZ	12320 SW 56 ST	
X Add				MIAMI, FL 33175	
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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f an amendment provides for an exchan	te reclassification	ır cancellation	n of issued sha	res	
provisions for implementing the amendi (if not applicable, indicate N/A)	nent if not containe	in the ameno	dment itself:	· · · · · ·	
		<u></u>			
-					

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)	
(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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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):	1
"The number of votes east 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.	
O8/12/2017 Dated Signature (By a director, posidest or other officer – if directors or officers have not been selected, by an poorpora or – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) YAMIR HERNANDEZ (Typed or printed name of person signing)	
VICE PRESIDENT	
*	

(Title of person signing)