PB000101953

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TALL AHASSEE FISTARE

MAR 1 5 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations TITUS FOOD MART INC. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MAZIN HASAN Name of Contact Person TITUS FOOD MART INC. Firm/ Company 701 S. DELEON AVENUE Address TITUSVILLE, FL 32780 City/ State and Zip Code TITUSFOODMART@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAHSHAWN STEWART Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Fiting Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

(Additional copy is

enclosed)

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

TITUS FOOD MART INC.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P13000101953	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	The Take
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 B. Enter new principal office address, if applicable:	"Co". A professional corporation name must contain the P.A." N/A N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	PH 4: 20.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
(Florida o	street address)
· ·	n eer waar essy
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	i <u>t:</u> 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	<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	<u>Name</u>	<u>Addres</u> s
1) Change	VP	SHADY KISKI	701 S. DELEON AVENUE
$\frac{X}{X}$ Add			TITUSVILLE, FL 32780
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove		,	
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
I/A	
	•
	· · · · · · · · · · · · · · · · · · ·
	•
IC	ange replacification or concellation of icanad charge
ii an amendment provides for an exch	alige, reclassification, or Cancenation of issued shares.
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A) //A	ndment if not contained in the amendment itself:

MARCH 2, 2016	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
MARCH 2, 2016	
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 v document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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.	
MARCH 2, 2016	
Dated	
A A	
Signature	
(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)	
RAHSHAWN STEWART	
(Typed or printed name of person signing)	
REGISTERED AGENT	
(Title of percon signing)	