P14000009433

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SECRITIARY OF STATE

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C. LEWIS
FEB 2 1 2014
EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corp.	nanons					
NAME OF CORPOR	BETTER C BER: P1400000943	HOICE FOOD, I	NC.			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.				
Please return all corres	pondence concerning this mat	tter to the following:				
	ANDREA FERRE					
Name of Contact Person ASSURED ACCOUNTING AND TAX SERVICES						
Firm/ Company 400 E. ATLANTIC BLVD STE D						
	POMPANO BEACH, FL 33060					
		City/ State and Zip Code	2			
GO	E-mail address: (to be us	AHOO.COM sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
ANDREA FERREIRA		at (954	, 793-0353			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check fo	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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

APPROVEU AND FILED

Articles of Amendment Articles of Incorporation of

14 FEB 20 AM 11: 34

SECRETARY OF STATE TALL AHASSEE, PLORIDA

BETTER CHOICE FOOD, INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
T / / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

endment(s) to

(Document Number of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amend		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain		
3. Enter new principal office address, if applicable:	644 NW 47TH ST.		
Principal office address MUST BE A STREET ADDRESS	POMPANO BEACH, FL 33064		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	644 NW 47TH ST.		
(mailing data ess MAT BE ATOST OFFICE BOS)	POMPANO BEACH, FL 33064		
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre Name of New Registered Agent			
new registered agent and/or the new registered office addre	SS:		
Name of New Registered Agent (Florida s	street address)		
Name of New Registered Agent (Florida s	street address) OMPANO BEACH, Florida 33064		
Name of New Registered Agent (Florida s New Registered C, fice Address: New Registered C, fice Address:	street address) OMPANO BEACH, Florida 33064		

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, :f necessary)

Please note the c, ficer/director title by the first letter cf the c; fice title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive C, ficer; CFO = Chief Financial C, ficer. If an c, ficer/director holds more than one title, list the first letter of each c, fice 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.

<u>PT</u>	John Doe				
<u>v</u>	Mike Jones				
<u>sv</u>	Sally Smith				
<u>Title</u>	Name	Address			
s	JUAREZ S. DOS SANTOS	10534 MARSH ST.			
		WELLINGTON, FL 33414			
Р	MARCIA E. DE GODOI	NEW ADDRESS:			
	•	644 NW 47TH ST.			
		Pompano Beach, FL 33064			
VP	POLIANE N. SANTOS	NEW ADDRESS:			
·		644 NW 47TH ST.			
		Pompano Beach, FL 33064			
	V SV Title S	 V Mike Jones SV Sally Smith Title Name S JUAREZ S. DOS SANTOS P MARCIA E. DE GODOI 			

		Be spec.fic)			1.
PLEASE,	ADD	FEI/EI	N NUN	nBER:	46-4695
					
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an amendment provides provisions for implementi					es,
(f not applicable, indi		The state of the s		19,70112	
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APPROVÉD AND FILED

The date of each amendmen	r(s) adoption. 02/18/201	14 FEB 20		, if other than the
date this document was signed Effective date if applicable:	02/18/2014	SEURETAN TALL AHASS	Y OF STATE SEE, PLORIDA	, it deficit that the
	(no mor	e than 90 days ofter amendm	ent file date)	
Adoption of Amendment(s)	(CHECK ON	<u>E</u>)		
	re adopted by the sharehold ere sufficient for approval.	ers. The number of votes cas	for the amendment(s)	
		ders through voting groups. It		
"The number of vote	s cast for the amendment(s)	was/were sufficient for appro	val	
by	(voting group		<u></u> ."	
The amendment(s) was/we action was not required.		lirectors without shareholder	action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporat	tors without shareholder actio	n and shareholder	
Dated 02/	18/2014			
Signature _		6.		
s		ther officer – if directors or of - if in the hands of a receiver, duciary)		
	MARCIA E. DE	GODOI		
	(Ту	ped or printed name of person	n signing)	
	PRESIDENT			
		(Title of person signing)		