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· (Req	uestor's Name)	
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Special Instructions to F	iling Officer:	

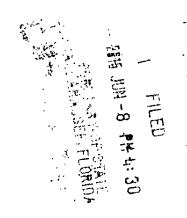
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JUN 18 2015 RAMSEV

COVER LETTER

TO: Amendment Section

Division of Corporations						
NAME OF CORPORATION: DOCUMENT NUMBER:	6000	ies Food	O M	ivi	MART	INC
DOCUMENT NUMBER:	P140	000 1074	5			_
The enclosed Articles of Amendmen	and fee are sub	mitted for filing.				
Please return all correspondence con-	cerning this matt	er to the following	;			
7232 	Rlango, Anifs Udress: (to be use	R. S Name of Contact Firm/ Comp SANO LA Address F1. City/ State and Z Ad for future annual	32 8 Cip Code	d, #)) 9	202	
For further information concerning the				^		-0
Name of Contact Per	eas	at (3	3 /	319	- 045	<u>9</u>
						umoci
Enclosed is a check for the following	g amount made p	ayable to the Florid	da Departn	nent of Stat	e:	
	Filing Fee & cate of Status	Certified Copy (Additional copenciosed)		2 \$52.50 Fi Certificate Certified (Addition is enclose	e of Status Copy al Copy	
Mailing Address			Street Ad			
Amendment Section				ent Section	ione	
Division of Corpo P O. Box 6327	rations		Clifton Bu	of Corporati uilding	10115	
Tallahassee, FL 32	2314			cutive Cent	er Circle	

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

FILED

Goodies F	Corporation as c	urrently fi	- (\$ \ \	HINT O	·	
A . H		411 (11111)	ied with the Flo	<u>rida Dept, of Sta</u>	<u>(1e)</u>	
Y 140	000 10	745		A HASSEE FL	orio#	
			orporation (if kno			
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statut	tes, this <i>Flo</i>	rida Profit Corp	o <i>ration</i> adopts th	e following amend	ment(s) to
A. If amending name, enter the new nam	ie of the corpora	tion:				
_					The n	e re
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Ins	.," or "Co	". A professiona	"incorporated" il corporation no	or the abbreviat	ion
B. <u>Enter new principal office address, if</u> (Principal office address <u>MUST BE A STI</u>			33 00 # 10	Sourh	Hinwas	see R
C. Enter new mailing address, if applica	ıble:	-	ONLANDO	, F1	32835	_
(Mailing address MAY BE A POST OF		-	3300	South H	IAWASSEE	_Rd
		_	# 107			_
		-	or lavo	o Fl	32835	_
D. If amending the registered agent and/ new registered agent and/or the new	or registered offi registered office	ice address address:	in Florida, ente	r the name of th	e	
Name of New Registered Agent	No	RMA		916	".,	
_	605	Bo	Tlei?	5,7		
	(FI	orida street e	uddress)	 .		_
New Registered Office Address:	WIND	CAME	1e_	. Florid	a 3478 (Zip Code)	6
New Registered Office Address.						

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar 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 D	o <u>e</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally S</u>	mith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<i>PS</i>	Ali M. MATTAR	5242 Chiswick CIR ORLANDO, Fl. 32812
Add Remove			on 1200, Fl. 32812
2) Change	VT	MOHAMADA. MATTAR	5242 ChisLICK CIR OALANDO, Fl. 32812
Add Remove	0 -		Add date to the control of the contr
3) Change Add Remove	PT	Sharif Abu SNAIN	3300 S. Hinunssee Rd 107 09/1900 Fl 32835
4) Change Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	Note of the second seco
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and and an and an
provisions for implementing the ame	nange, 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
late this document was signed.	
Effective date if applicable: 6/1/15 (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, t document's effective date on the Department of State's records	his date will 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 amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following so 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	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	cholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated	
Superiura Oli matta	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
Ali MATTAR	
(Typed or printed name of person signing)	
Paesident	
(Title of person signing)	