Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000219132 3)))



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**Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please. **

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COR AMND/RESTATE/CORRECT OR O/D RESIGN IPIES INC.

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Secti Division of Corpo						
NAME OF CORPOR	ATION: IPIES INC.					
DOCUMENT NUMB	BER: P14000028272					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this mat	ter to the following				
	Cheyenne Moseley					
		Name of Contact Person	1			
	LegalZoom.com, Inc.					
•		Firm/ Company				
	100 W. Broadway Suite 10	10				
,	•	Address	·			
	Glendale, CA 91210					
		City/ State and Zip Cod				
Usad	avid@hotmail.com	ed for future annual report	- dFdX			
	E-mail address: (to be us	ed for future annual report	nontecation)			
For further information	concerning this matter, pleas	e call:				
Cheyenne Moseley		at (323	962-8600 ext 7950			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	Enclosed is a check for the following amount made payable to the Florida Department 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			Address			
Amendment Section		Amendment Section				
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building				
	hassee, FL 32314		xecutive Center Circle			
141.			issee, FL 32301			

FILED

Articles of Amendment to Articles of Incorporation of

IPIES INC.

宫H SEP 18 AM 11:00

SEC /ETARY BE STATE TALLAHASSEE, FLORIDA

amendment(s) to

(Name of Cornoration as	• •	0028272) <i>(B</i>)	
(Documer	nt Number of Corporation	(if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corpo	ration adopts the following amend	ne
A. If amending name, enter the new na	me of the corporation:			
Berrybest Brand Inc.			The n	ew
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional		
B. Enter new principal office address.		16251 N Clevels	and Suite 9	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	N. FT. Myers, Fi	. 33903	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	<u>cable:</u> DFFICE BOX)	16251 N Cleveland Suite 9		
		N. FT. Myers, FL	. 33903	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent			the name of the	
	16251 N Cleveland Su	iite 9		
		street address)		
New Registered Office Address:	N. FT. Myers		Florida 33903	
	(Cit	אט	(Zip Code)	
New Registered Agent's Signature, if all I hereby accept the appointment as regist	hanging Registered Ages ered agent. I am familian	r with and accept the ob	ligations of the postiton.	

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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.

X Change	PT	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PTSD	DAVID MCCULLOCH	16251 N Cleveland Suite 9
Add			N. FT. Myers, FL 33903
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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Š.	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	ұмыны шашыны элегіз, ij несеззағуу. — (De specific)
	· · · · · · · · · · · · · · · · · · ·
-	
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	•
Ŧ.	If an amendment provides for an exchange, reclassification, or expeditation of issued shares.
	provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
-	
_	
_	

Page 3 of 4

4.q 1852-995-952 sei9 brand free pt 81 ob 14 05:01 pt 81 de 8

The date of each amendment(s) adoption: 9/8/20 date this document was signed.	014	, if other than the
Effective date if applicable:		
(n	o more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHEC	K ONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro-	reholders. The number of votes cast for the amendment(s) oval.	
	archolders through voting groups. The following statement sup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment	ent(s) was/were sufficient for approval	
by		
(voung	group)	
The amendment(s) was/were adopted by the boar action was not required.	rd of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the inco- action was not required.	prporators without shareholder action and shareholder	
Dared Suff 16	/14	
Signature	DM GM	
	t or other officer - if directors or officers have not been-	
	rator — if in the hands of a receiver, trustee, or other court	
appointed fiduciary by		
	Dave Mcculloch	
	(Typed or printed name of person signing)	 -
	President	
	(Title of person signing)	