P14000051815

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| [| | - |

Office Use Only



900266635769

11/20/14--01014--011 **35.00

DIVISION OF CURPORATION

Clewis 12,2,14

COVER LETTER

TO: Amendment Section Division of Corporations

| · | NODTH D | AVTONA 500 | |
|--------------------------|---|--|--|
| | ATION: NORTH DA ER: P140000518 | | DWARKETING |
| DOCUMENT NUMB | ER: 1 140000010 | | |
| The enclosed Articles of | of Amendment and fee are sul | omitted for filing. | |
| Please return all corres | pondence concerning this mat | ter to the following: | |
| | WINSTON WE | ILHEIMER | |
| - - | | Name of Contact Person | n |
| | INHOMETAXS | ERVICE@MS | SN.COM |
| • | | Firm/ Company | · · · · · · · · · · · · · · · · · · · |
| | 206 S SPRING | GARDEN AV | /E |
| | | Address | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| _ | DELAND FL 32 | 2720 | |
| | | City/ State and Zip Cod | е |
| INF | HOMETAXSER | VICE@MSN | COM |
| | | ed for future annual report | |
| | | | |
| For further information | concerning this matter, pleas | e call: | |
| WINSTON | WEILHEIMER | at (| , 3867368752 |
| Name o | f Contact Person | | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made p | 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) |
| <u>Mail</u> | ing Address | Street | Address |
| | ndment Section tion of Corporations | | lment Section on of Corporations |
| 151.419 | ion or corporations | DIVISIO | ai oi Corporations |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



NORTH DAYTONA FOOD MARKET INC

14 HOV 20 PH 3: 08

(Name of Corporation as currently filed with the Florida Dept. of State) P14000051815

dment(s) to

| (Document N | Number of Corporation (if known) | <u></u> |
|--|---|---|
| Pursuant to the provisions of section 607.100 its Articles of Incorporation: | 06, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fo | llowing amend |
| A. If amending name, enter the new name | e of the corporation: | |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio word "chartered," "professional association | n the word "corporation," "company," or "incorporated" or on "Corp," "Inc," or "Co". A professional corporation name n," or the abbreviation "P.A." | The n the abbreviate must contain |
| B. <u>Enter new principal office address, if a</u> Principal office address <u>MUST BE A STRE</u> | applicable: PEET ADDRESS) | |
| C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF)</u> | | |
| new registered agent and/or the new re | | |
| Name of New Registered Agent | JUNED JAKIR | |
| <u>1</u> | (Florida street address) | |
| New Registered Office Address: | DAYTONA BEACH FL 32117, Florida 3211 | 7 |
| New Registered Office Address. | (City) (Zip Co | ode) |
| New Registered Agent's Signature, if chan I hereby accept the appointment as registered | nging Registered Agent: ed agent. I am familiar with and accept the obligations of the positive of New Registered Agent, if changing | sition. |

| i 1 12 | |
|--------|--|
|--------|--|

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 | PT John | n Doe | |
|-------------------------------|---------------------|----------------|------------------------|
| X Remove | <u>V</u> <u>Mik</u> | <u>e Jones</u> | |
| X Add | SV Sall | y Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | <u>P</u> | MOHAMMED AWAL | 1248 MASON AVE |
| Add | | | DAYTONA BEACH FL 32117 |
| X Remove | | | |
| 2) Change | <u>P</u> | JUNED JAKIR | 1248 MASON AVE |
| X_{Add} | | | DAYTONA BEACH FL 32117 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| cuoi | e <mark>nding or adding add</mark> h <i>additional sheets, if n</i> | ecessary). | (Be specific) | | | |
|------|--|---------------|----------------|-----------------|-------------------|-------------|
| | , | • • | • • • | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | ' | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | ***** | | | · | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| an | amendment provides | for an exchai | nge, reclassit | ication, or can | cellation of issi | ied shares. |
| prov | <u>isions for implementi</u> | ng the amend | lment if not | contained in th | e amendment i | tself: |
| (| (if not applicable, indic | cate N/A) | | | | |
| | | | | | | |
| | | | | | | |
| | | • | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

11/17/2014

SLURETARY OF STATE

| The date of each amendment(s) ad | 11/17/2014 | SLUKETARY OF STATE STATE CORPORATIONS |
|---|--|---------------------------------------|
| date this document was signed. | 1/17/2014 | 14 NOV 20 PH 3: 08 |
| | (no more than 90 days afte | er amendment file date) |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number officient for approval. | f votes cast for the amendment(s) |
| | roved by the shareholders through voting each voting group entitled to vote separa | |
| "The number of votes cast | for the amendment(s) was/were sufficien | it for approval |
| by | (voting group) | ** |
| | (voting group) | |
| ☐ The amendment(s) was/were ado action was not required. | pted by the board of directors without sh | nareholder action and shareholder |
| ☐ The amendment(s) was/were ado action was not required. | pted by the incorporators without shareh | older action and shareholder |
| Dated 11/1 | 7/2014 | |
| Signature | Aller . | |
| selected | irector president or other officer – if direct, by an incorporator – if in the hands of ted fiduciary by that fiduciary) | |
| | JUNED JAKIR | |
| | (Typed or printed name | ne of person signing) |
| | PRESIDENT | |
| | (Title of perso | on signing) |