## P14 000080579

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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C. GOLDEN MAR - 3 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: KRG FO	ads, Inc.
DOCUMENT NUMBER: P1+000	0080579
The enclosed Articles of Amendment and fee are submitted:	for tiling.
Please return all correspondence concerning this matter to th	e following:
Keita Glk	of Contact Person
F	irm/ Company
1620 NE 7	Address
FORT LLX City/	State and Zip Code
E-mail address: to be used for fu	ture annual report notification)
For further information concerning this matter, please call:	
Name of Contact Person	at ( 786.) 314-8563 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	to the Florida Department of State:
Certificate of Status Cert (Add	.75 Filing Fee
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 17, 2020

KRISTIN GLANSEN **1620 NE 7 STREET** FORT LAUDERDALE, FL 33304

SUBJECT: KRG FOODS, INC. Ref. Number: P14000080579

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The complete document was not received.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 520A00003532

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

W06	E-d- 100
(Name of Corporation a	is currently filed with the Florida Dept. of State)
(Document	OOG 80579 Number of Corporation (if known)
	nutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
	The new
	ration, ""company," or "incorporated" or the abbreviation "Corp.," ""Co". A professional corporation name must contain the word ion "P.A."
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRE</u> .	<u>SS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
Thursday and the second	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Simuture	e of New Registered Agent, if changing
Signam.	and the companies of the companies

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>_v.</u> P	GREGORY CHUEZ	1620 NE 7 STREET
Add		<b>\( \)</b>	Foot Ludredule FL
Remove			3330-
2) Change			<u> </u>
Add			
Remove 3) Change			
Add			
Remove			<u></u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Remove			

	amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
	<del></del>
_	
_	, — , , , , , , , , , , , , , , , , , ,
<u>f</u> 2	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>pr</u>	rovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
_	

.

The date of each amendment(s) adoption:date this document was signed.		, if other than the
date this document was signed.	,	
Effective date if applicable:	1/2020	
(no	nore than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block does not me document's effective date on the Department of State		date will not be listed as the
Adoption of Amendment(s) (CHECK	CONE)	
The amendment(s) was/were adopted by the incoraction was not required.	rporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro		nt(s)
	reholders through voting groups. The following state up entitled to vote separately on the amendment(s):	ement en
"The number of votes east for the amendme	ent(s) was/were sufficient for approval	
by		
(voting g	(гоцр)	
Dated	) l 0	
	or other officer – if directors or officers have not becauter – if in the hands of a receiver, trustee, or other education of the fiduciary)	
(Type	ed or printed name of person signing)	
——————————————————————————————————————	desident e of person signing)	