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COVER LETTER

TO: Amendment Section , **Division of Corporations** NAME OF CORPORATION: KING'S FOOD SPOT INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LUIS R. SMITH Name of Contact Person TAXES USA LLC Firm/ Company 5892 STIRLING RD # 4 Address HOLLYWOOD FL 33021 City/ State and Zip Code INFO@TAXESUSAMIAMI.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 Area Code & Daytime Telephone Number LUIS R. SMITH Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

KING'S	EOOD	SPOT	INC
C 11 1/1 1 . 3	$\Gamma \setminus \Lambda \setminus I \setminus I$.31 () 1	1111

(Name o	of Corporation as curren	tly filed with the Florida Dept. o	of State)	
P14000081795				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adop	ots the following amendment	(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Coattered," "professional association,"	Corp," "Inc." or "Co".	A professional corporation nam	the abbreviation "Corp.," ne must contain the word	
B. Enter new principal office address,	if applicable:			
(Principal office address MUST BE A S				
			737	
		 	<u></u>	
C. Enter new mailing address, if appl				
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)			
			of the 8	
			12	
D. If amending the registered agent ar	nd/or registered office ad	dress in Florida, enter the name	of the	
new registered agent and/or the ne				
Name of New Registered Agent	TAXES USA LLC			
	5892 STIRLING RD # 4			
	(Florida :	street address)		
V D : 100 111	HOLLYWOOD	1*	33021	
New Registered Office Address:		, r , (City)	Florida (Zip Code)	
		(-27)	(10.4)	
New Registered Agent's Signature, if o	hanging Degistered Age	nt.		
I hereby accept the appointment as regis.			of the position.	
, ,			•	
	\	_		
		\rightarrow		
	Signature of New	Registered Agent, if changing		
CH 1.56 P. 15	,	/		
Check if applicable ☐ The amendment(s) is/are being filed r	nursuant to s. 607 0120 (13)(e) FS		
s amenaments) is are veing inter		1 1-11 1		

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 Do	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	P	_	YOUSEF AYYAD	6310 NW 18TH AVE
XAdd				MIAMI, FL 33147
Remove				
2) Change				
Add				
Remove 3) Change		<u> </u>		
Add				
Remove				
4) Change		_		.,
Add				
Remove				
5) Change		_	·-	
Add				
Remove				
6) Change				
Add				
Remove				

(4	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)
	
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'. <u>II</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
1	(if not applicable, indicate N/A)
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: (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, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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" (voting group)
(voting group)
06/05/2020 Dated
Signature Yousef Ay Yand
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
YOUSEF AYYAD
(Typed or printed name of person signing)
PRESIDENT