PN4000086394

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| (Re | questor's Name) | , |
| (Ad | dress) | |
| | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| /Ru | siness Entity Nar | mo) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: 1 LOVE | NY PIE INC | | | | | |
|---|---------------------------------|--|--|--|--|--|
| DOCUMENT NUMBER: P1400008639 | | | | | | |
| The enclosed Articles of Amendment and | fee are submitted for filing. | | | | | |
| Please return all correspondence concerning | ng this matter to the following | g : | | | | |
| DOMINGO MON' | ΓES | | | | | |
| | Name of Contact Person | | | | | |
| I LOVE NY PIE IN | NC | | | | | |
| | Firm/ Comp | pany | | | | |
| 5643 E COLONIA | L DR | | | | | |
| | Address | 8 | | | | |
| ORLANDO FL 32 | 807 | | | | | |
| | City/ State and 2 | Zip Code | | | | |
| ELYTAX@AOL.COM | | | | | | |
| E-mail address | s: (to be used for future annua | l report notification) | | | | |
| For further information concerning this ma | atter, please call: | | | | | |
| DOMINGO MONTES | at (|) | | | | |
| Name of Contact Person | | | | | | |
| Enclosed is a check for the following amo | unt made payable to the Flori | da Department of State: | | | | |
| ■ \$35 Filing Fee □\$43.75 Filing Certificate o | | Certificate of Status | | | | |
| Division of Corporations P.O. Box 6327 Division of Corporations Cliffon Building | | Amendment Section Division of Corporations | | | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

I LOVE NY PIE INC (Name of Corporation as currently filed with the Florida Dept. of State) P14000086394 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code) 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 Doe | |
|----------------------------|--------------|-------------------------|--------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| I) Change | S | MIGUEL A MORALES CASTRO | 3803 S SANFORD AVE |
| Add | | | SANFORD FL 32773 |
| X Remove | | | |
| 2) Change | S | MIGUEL A MORALES CASTRO | 3803 S SANFORD AVE |
| Add | | | SANFORD FL 32773 |
| X Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| - | icles, enter change(s) here: (Be specific) |
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| f an amendment provides for an exch 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 exch provisions 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 and and an and an analysis and |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and and an and an and an |
| 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, ndment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and the amendment itself: |

| The date of each amendment(s) adoption: | , if other than the |
|---|----------------------|
| alte (nis document was signed. | |
| Effective date <u>if applicable</u> : (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 document's effective date on the Department of State's records. | not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| 08/05/2015 Dated | |
| Signature (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) | _ |
| DOMINGO MONTES | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |

(Title of person signing)