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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORP	ORATION: DREAMIE COOK	IES BY ST. JAMES INC	·
DOCUMENT NUM	MBER: P15000008373	-	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Jack Pinnock		
		Name of Contact Perso	on
	DREAMIE COOKIES BY ST	T. JAMES INC.	
		Firm/ Company	
	5335 Falling Water Dr		
		Address	
	Orlando, FL 32818		
		City/ State and Zip Coo	de
sale	es@dreamiecookies.com		
	-	sed for future annual repor	1 notification)
For further informat	ion concerning this matter, pleas	se call:	
Jack Pinnock		407 at (421-1249
Nam	e of Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:
S35 Filing Fee	S43) 5 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi Clifto	t Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DD	GAMIL	COOKIES	BV ST	TAMES INC.
IJĸ	T. ALIVITE	' 1 [[] [] [] [] []	D 1 .5 1 .	. JAINES INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P15000008373			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
Dreamie Foods, Inc.	The new		
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	5335 Falling Water Dr		
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL		
	32818		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2018 OCT 10		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre			
(Florida :	street address)		
New Registered Office Address:	. Florida		
New Registered Office Address.	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia			
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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>mes</u>	
X Add	<u>sv</u>	Sally Sr	mith_	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
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4)Change		<u></u> -		
Add				
Remove				-
5) Change				
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6) Change				
Add				
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	s, if necessary).	icles, enter change (Be specific)			
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f an amendment prov	والمحاور والملام والمكاف والمرا				
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f an amendment prov provisions for implen (if not applicable,	indicate N/A)		tained in the and	ndment itself:	

The date of each amendment(s)	10/16/2018	, if other than the
date this document was signed.		, it other than the
- '	/16/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will be partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
10/16/20	8	
DatedSignature	Jack Pinnak	
(By)	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoi	nted fiduciary by that fiduciary)	
	Jack Pinnock	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	