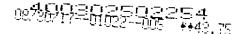
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(Re	questor's Name)
(Ad	dress)	-
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SEP - 5 ZO17
I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MEDAL SEA	FOOD INC
NAME OF CORPORATION: <u>MEDAL SEA</u> DOCUMENT NUMBER: <u>P150000 13047</u>	
The enclosed Articles of Amendment and fee are submitted for	r filing.
Please return all correspondence concerning this matter to the f	ollowing:
Maetin G	MZa/4Z
Name o	of Contact Person
11.4.1 6.0	FUDO LINC
<u> </u>	too Lnc
rir 2 a .	m/ Company
	208 terruet
	Address
Miami,	FL 33177
City/ St	208 terrale Address FL 33177 ate and Zip Code
	•
moneadai	18. mg@gmoil_com reannual report polification)
E-mail address: (to be used for futu	re annual report potification)
For further information concerning this matter, please call:	
1 Inntin Genzalaz	701 021 2101
Name of Contact Person	at (<u>786</u>) <u>226 - 3494</u> Area Code & Daytime Telephone Number
Name of Contact Ferson	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to	the Florida Department of State:
Certificate of Status Certifi	E Filing Fee & S52.50 Filing Fee ed Copy Certificate of Status conal copy is Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Taliahassee, FL 32314	Clifton Building
(anatiassec, 17, 52514	2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

0	. •		
MEDAL SFI	AFOOD	inc	彩世.
(Name of Corporation as current			دن بند ک
P1500001	3047		
(Document Number of		f known)	* 3
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit (Corporation adopts the fe	ollowing amondment
A. If amending name, enter the new name of the corporation:			- 3
			The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A profes.		
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		NIA	"
		<u>'//</u> +	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		NIA	
		-///	
			
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		enter the name of the	
men registered agence and/or the new registered writer address	,		
Name of New Registered Agent	<i>N</i> _/	A	
	/		
(Florida st	treet address)		
New Registered Office Address:		, Florida	
into negastrea Office Maaress.	(City)	, 1 lottua	(Zip Code)
		•	
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent. I am famihar	with and accept	the obligations of the pos	rition.
	N/	14	
Signature of New 1			
Signature of New I	кедіметей Адепі	, y 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: <u>X</u> Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	SV Sally	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u> P</u>	MARtin Gonzalaz	11831 SW 208 terrace
Add			Minmi, FL 33177
X Remove			
2) Change	P	SARA GOMZalaz	11831 SW 208 terrace
_X Add			Miami, FL 33177
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If amending or adding additional Articles, enter change(s) by (Attach additional sheets, if necessary). (Be specific)	eere:
ApriciE IV	
TOTAL SHARES (100) belongs	to SARA GENZALOZ
(New president and new	U DWNER of company)
	3133-30
F. If an amendment provides for an exchange, reclassification, provisions for implementing the amendment if not containe (if not applicable, indicate N/A)	
THE TOTAL SHARES OWNER	will be SARA GANZALOZ

The date of each amendment(s) adoption:	08/10/2017	, if other than the
date this document was signed.		
Effective date if applicable:		
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State	eet the applicable statutory filing requirements, this e's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK	CONE)	
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approx	cholders. The number of votes cast for the amendment oval.	nt(s)
	reholders through voting groups. The following state, up entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendmen	•••	
by	77	
(voting g	group)	
The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and sharehol	lder
☐ The amendment(s) was/were adopted by the incorpaction was not required.		
Dated <u>8/10/2017</u> Signature	7	
(By a director, president selected, by an incorpora appointed fiduciary by the	or other officer – if directors or officers have not bee ator – if in the hands of a receiver, trustee, or other co hat fiduciary)	n ourt
	MARIN GONZALOZ	
(Туре	HARTIN GONZA la Z ed or printed name of person signing)	
	Prasident	
···	(Title of person signing)	