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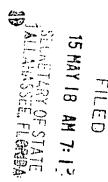
(Requestor's Name)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ALEXA'S FARME	RS MARKET, INC			
DOCUMENT NUMB					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	pondence concerning this mat	tter to the following:			
	LAURA MONTANARO				
		Name of Contact Persor	1		
	ABACUS PAYROLL & ACCOUNTING, INC				
		Firm/ Company			
	1140 NE 2ND STREET	. ,			
		Address			
	POMPANO BEACH, FL 330)60			
		City/ State and Zip Code	è		
ARA	CUSPOMPANO@AOL.COM	1			
	•	sed for future annual report	notification)		
	·	·			
For further information	n concerning this matter, pleas	se call:	·		
LAURA MONTANARO		954	de & Daytime Telephone Number		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filling Fee	□\$43 75 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 Tallabassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ALEXA'S FARMERS MARKET, INC.

(Name of Corporation as currently	filed with the Florida Dept. of State)
P15000031484	,
(Document Number of	Corporation (1f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
FRESH TO GO, INC	The _new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "C word "chartered," "professional association," or the abbreviation "F	," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	15 HAY
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address.	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
New Registered Office Address. (Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	, Florida City) (Zip Code)

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)	Titte	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kennove			
6) Change			
Add			
Remove			

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f an amendment provid provisions for implemen (if not applicable, in	nting the ame	lange, reclassi ndment if not	fication, or can contained in th	cellation of issue c amendment its	ed shares, self <u>:</u>	
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provisions for implemen	nting the ame	iange, reclassi	fication, or can	cellation of issue e amendment its	ed shares, self:	

	05/12/2015	
The date of each amendment(s) addite this document was signed.	doption:	, if other than the
	2/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval	
	proved by the shareholders through voting groups. The following statement 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 adaction was not required	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
5-12-2015 Dated		
Signature	Lu IIIa	
(By a c selecte	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 inted fiduciary by that fiduciary)	
	RUBEN ULLOA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	