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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION:	ERY & PRODUCE				
	BER: P15000084641					
The enclosed Articles	s of Amendment and fee are s	ubmitted for filing.				
Please return all corre	espondence concerning this m	atter to the following:				
	JUDITH D WILLIAMS					
		Name of Contact Perso	on			
	CARIBE GROCERY & PRO	ODUCE INC				
		Firm/ Company				
	7155A PEMBROKE ROAD					
Address						
	PEMBROKE PINES FLORIDA 33023					
		City/ State and Zip Cod	le			
ध म्मा.	THE PARTY OF THE WILL	CARIBELO	UNGE 7155A agrad	il com		
-	E-mail address; (to be u	sed for future annual report	notification)	<i>الله وال</i>		
		·				
For further informatio	n concerning this matter, plea	se call:				
JUDITH WILLIAMS		at (882-0010			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	payable to the Florida Depa	irtiment of State;			
S35 Filing 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		Amend Divisio	Address ment Section n of Corporations Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CARIBE GROCERY & PRODUCT INC.

CARIBE GROCERT & PRODUCE INC	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P15000084641	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: CARIBE LOUNGE INC	
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 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. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	3300 Spanish Moss Terra Apt 102 Lauderhili FL 33023
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida str	evt address)
New Registered Office Address:	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar v	eith and accept the obligations of the position: SEP 9 19 SEP 9 19 Segistered 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:	c, and Sai	lly Smith, SV as an Add,	
X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3.) Change		- <u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

famending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	
		
		_
on amendment provides for an excha	nge, reclassification, or cancellation of	·
<u>axisions for implementing</u> the amend	dment if not contained in the amendmen	nt_itself:
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	, if other than the
date this document was signed. 09/03/2019	
Effective date if applicable:	
(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)	
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.	
Dated9112019	
Signature	
(By a prector, 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)	
Judith D Williams (Typed or printed name of person signing)	
The index of person signing)	
(Title of person signing)	
() life of person signing)	