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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Mr. Potato Spreac	l Inc		
	P16000021525			
DOCUMENT NUMI	BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Lakita Spann			
		Name of Contact Persor	1	
	Mr. Potato Spread Inc			
	9501 Arlington Expressway	Firm/ Company Ste FC02		
	Jacksonville, FL 32225	Address		
		City/ State and Zip Code	e	
lakit	a@mrpotatospread.com		,	
	E-mail address: (to be u	sed for future annual report	notification)	
	,	·	·	
For further informatio	n concerning this matter, pleas	se call:		
Lakita Spann		9X)4 at (3()2-()024)_	
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	urtment of State:	
□ \$35 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)	
<u>Mai</u>	ling Address	Street	Address	
	endment Section		ment Section	
	sion of Corporations	Division of Corporations		
	. Box 6327 ahassee, FL 32314		Building xecutive Center Circle	
1 411	anasace, i is 52314	2001 E	ACCURAC COMOL CHOIC	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	ntly filed with the Florida Dept. of St	(ate)	
Mr. Potato Spread Inc.	1005		
(Document Number	of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	,	he following amen	idment(s) to
A. If amending name, enter the new name of the corporation:			
		The	#1#14#
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	"Co". A professional corporation n	" or the abbrevia	ttion
	9501 Arlington Expressway		
B. Enter new principal office address, if applicable:		· ; 2	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ste FC02		
	Jacksonville, FL 32225	- 111	e di
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	893 Bunker Hill Blvd	9 PH	
· · · · · · · · · · · · · · · · · · ·	Jacksonville, FL32208		— Degrynsis
D. If amending the registered agent and/or registered office ad	draw in Florida, antar the name of th		 -
new registered agent and/or the new registered office addre		<u>1e</u>	
Name of New Registered Agent			
-			
{Florida s	areet address)		
New Registered Office Address:	, Floric	ia	_
	(City)	(Zsp Code)	
New Registered Agent's Signature, if changing Registered Ager	nt:		
hereby accept the appointment as registered agent. I am familian	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.

Nuke Jones, v as Remove	, and Sai	ty Smith, 3	SV as an Add.	
Example: X Change	<u>PT</u>	John Do	<u>ve</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
_X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1)Change				
Add				
Remove				
2) Change		-		
Add				
Remove				
3) Change		· - -		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		-
Add				
Remove				

(Attach adv	<mark>ig or adding additio</mark> litional sheets, if nece	nal Articles,	enter change(s	s) here:			
(Attach and	лиота знеего, у несе	rssary). [De	<i>specijic)</i>				
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<u>,</u> _							
							<u>.</u>
. If an amer	dment provides for	an evchance	realaccificatio	n or annaella	tion of issued s	harac	
provision	<u>s for implementing t</u>	he amendme	nt if not conta	ined in the am	endment itself:		
(if no	applicable, indicate	N/A)					
					····		
					•••		

The date of each amendment(s) acd ate this document was signed.	loption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	roved 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)
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
DatedO/	1/19
Signature	Calla Dam
	rector, president or other officer – indirectors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court
	ed fiduciary by that fiduciary)
	Lakita Spann
	(Typed or printed name of person signing)
	President
	(Title of person signing)