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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: RAMFAM FOOD	SINC			
DOCUMENT NUMF					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Young Aruwa				
	Name of Contact Person				
		Firm/ Company			
	7425 Miami Lakes Drive				
	Address				
	Miami Lakes, FL 33014				
		City/ State and Zip Cod	e		
yaruw	a@att.net				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Young Aruwa		786	344-5680		
Name o	of Contact Person	Area Code & Daytime Telephone Numbe			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment 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			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

RAMFAM FOODS INC			
( <u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	
P16000026718			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new n	ame of the corporation:		
		The new	
	nation "Corp." "Inc." or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:		7425 Miami Lakes Drive	
(Principal office address MUST BE A S		Miami Lakes, FL 33014	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7425 Miami Lakes Drive	
	· · · · · · · · · · · · · · · · · · ·	Miami Lakes, FL 33014	
D. If amending the registered agent at new registered agent and/or the ne			
	Erika Peto	<del></del>	
Name of New Registered Agent	7425 Miami Lakes Drive		
		treet address)	
N D ' LOSS ALL	Miami Lakes	33017	
<u>New Registered Office Address</u> :		(City) , Florida (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis		with and accept the obligations of the position: $\frac{1}{2}$ .	
	Erika		
	Signature of New	Registered Agent, if changing 二 章	
		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	

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	$\underline{\mathbf{v}}$	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	P	Karina Ramirez	3531 W 88th Street
Add	<del></del>		Hialeah, FL 33018
X Remove			
2) Change	þ	Erika Peto	14855 S Biscayne River Drive
Add			Miami, FL 33168
Remove			
3 ) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<del> </del>	
	<del></del>
<del></del>	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
/A	
*	
·	
	· · · · · · · · · · · · · · · · · · ·

	January 1, 2018	18 a a a
The date of each amendment(s date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	anuary 1, 2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this compartment of State's records.	late will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment e sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
1/1/201 Dated	8	
Signature	Eriha Pito	
(By selo	a director, president or other officer – if directors or officers have not beer ected, by an incorporator – if in the hands of a receiver, trustee, or other colointed fiduciary by that fiduciary)	
	Erika Peto	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	