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SECRETARY OF STATE ALLIANASSEE. FLORIDA.

TECHRITEDER

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: _ P/60000 29921 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sandra Welzer
Name of Contact Person SELDL FIT Foods Inc 3160 Ne 27th are

Address

Lighthouse Point FL 33064

Cityl State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sandra Welzer at (954) 805 5073

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

• 1

of

S & LDL	FIT Foods Inc
(Name of Corporation as current)	ly filed with the Florida Dept. of State)
Ρ	18060000 29921
(Document Number o	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:	
	VAThe new
name must be distinguishable and contain the word "corporation," "all "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". I chartered, ""professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
C. Enter new mailing address, if applicable:	TALLAH:
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	—————————————————————————————————————
D. Hamending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent 5 AUDIA	Welzer
3/60 Ne	28th are
New Registered Office Address: Lightho	OUSE Point Florida 33064 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of Sen A	t: with and accept the obligations of the position. 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.

Example: 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) X Change	\angle	Sandra Welzer	3/60 Ne 28th are
Add			Lighthouse PoinT
Remove			_ FL 33064
2) Change			
Add			
Remove 3) Change			(62)
Add			
Remove			
4) Change			&
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. <u>If amending or add</u> (Attach <i>additional sh</i>	ing addi wets, if n	tional Articles, enter change(s) here: ecessary). (Be specific)	

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		2	LL!
(if not applicable, indicate N/A)	55	=	O
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Page 3 of 4			
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The date of each amendment(s) adoption: 12/12/19		, if oth	ier than th
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 meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	d by the shareholders. The number of votes east for the amendment(s) tient for approval.	
	red by the shareholders through voting groups. The following statement the voting group entitled to vote separately on the amendment(s):	
"The number of votes east for t	the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
action was not required. The amendment(s) was/were adopted action was not required. Dated Signature (By a processed selected, by	d by the board of directors without shareholder action and shareholder 12/12/19	FILED
	James Welzer	
	(Typed or printed name of person signing)	
	Presiden7	_
(Tit	tle of person signing)	