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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: THE FOOD CLUI	3 CORP.	
DOCUMENT NUME	ER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Vivek Jayaram		
		Name of Contact Pe	rson
	Jayaram Law, Inc.		
		Firm/ Company	
	125 S Clrak 1175	, .	
		Address	
	Chicago IL 60603		
		City/ State and Zip C	Code
		•	
lirm@	jayaramlaw.com E-mail address: (to be u		- de la differencia de la constanta de la cons
	E-mail address: (to be u	sed for future annual rep	on notification)
For further information	concerning this matter, pleas	se call:	
Vivek Jayaram		at (³¹²	212-8676
Name o	of Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida I	Department of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status
Ame Divi P.O.	ling Address Induction Section Ission of Corporations Box 6327 Ishassee, FL 32314	Air Div Cli	reet Address nendment Section rision of Corporations fton Building 61 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE FOOD CLUR CORI

THE POOD CLUB CORP.		
(Name of Corporation as current	lly filed with the Florida	Dept. of State)
1/h-39712		
(Document Number o	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporati	on adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		77.
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 co.	•
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	
		A S 19 A 16 A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	ARY ASSER
-		FES. 9
		ALE TO A STORAGE T
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		name of the
Name of New Registered Agent N/A		
(Florida st	reet address)	
New Registered Office Address: N/A		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		utions of the position.
Signature of New	Revistered Avent if chang	ina

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 = ChiefExecutive 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: \underline{X} Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) N/A Change		N/A	N/A
Add			
Remove			-
2) Change			APR 2 ARETARY
Add			The second secon
Remove			F STATE TO RRIDE
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The number of authorized shares of the Company is amended from 1,500 to 100,000 shares.		
	<u>_</u>	
	·	
	SEDR FALLA	19
	SEDRETY TALLAHA	A PR
If an amendment provides for an exchange reclassification or cancellation of issued shares	SECRETARY FALLAHASSE	A PR
. 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:	SECRETARY OF TALLAHASSEE.	APR 12
. 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: (if not applicable, indicate N/A)	SECRETARY OF ST TALLAHASSEE, FLO	APR 12 AM
provisions for implementing the amendment if not contained in the amendment itself:	EDRETARY OF LLAHASSEE, F	APR 12
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	EDRETARY OF ST LLAHASSEE, FLO	APR 12 AM
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	EDRETARY OF ST LLAHASSEE, FLO	APR 12 AM
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	EDRETARY OF ST LLAHASSEE, FLO	APR 12 AM

, . April 9, 2019		
Fhe date of each amendment(s) adoption:	, if oth	er than th
date this document was signed.		
April 9, 2019 Effective date if applicable:		<u> </u>
(no more th	han 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be lids.	sted as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)		
The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle		
"The number of votes cast for the amendment(s) was	s/were sufficient for approval	
by(voting group)		
(voting group)	~_ ~	
☐ The amendment(s) was/were adopted by the board of direct action was not required.	ctors without shareholder action and shareholder	71
☐ The amendment(s) was/were adopted by the incorporators action was not required.	To 🔏	
Dated 1/9/2019	STATE LORIDA	
Signature		
	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 fiduc	ciary)	
Eduardo Rebolio		
(Typed or prin	nted name of person signing)	_
100% Shareholder and C	Chairman of the Board	
	Fitle of person signing)	_