Electronic Filing Cover Sheet

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Doing so will generate another Division of Corporations Fax Number : (850)617-6380 Account Name : CORPORATE CREATIONS INTERNATIONAL INC. Account Number : 110432003053 : (561)694-8107 : (561)214-8442 Fax Number **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:__

COR AMND/RESTATE/CORRECT OR O/D RESIGN **EMANUEL FOODS INC**

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$35.00 |

15612148442

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Articles of Amendment to Articles of Incorporation

| EMANUEL FOODS INC | |
|--|-----------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) | |
| P16000046327 | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folloits Articles of Incorporation: | owing amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevilne.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must co "chartered," "professional association," or the abbreviation "P.A." | viation "Corp.," |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | |
| | <u> </u> |
| | |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the | |
| new registered agent and/or the new registered office address: | 111121 |
| Name of New Registered Agent | TO TO |
| | 产量io |
| (Florida street address) | |
| New Registered Office Address:, Florida | |
| (City) | (Zip Code) |
| New Registered Office Address:, Florida, (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positions. | ion. |
| | |
| Signature of New Registered Agent, if changing | |
| Check if applicable | |

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.

| X Change | PT John D | <u>'0¢</u> | |
|-------------------------------|------------------------|----------------|----------------------|
| X Remove | <u>V</u> <u>Mike J</u> | <u>ones</u> | |
| X Add | SV Sally S | mith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | Director, President | EMANUEL, KEVIN | 2468 BROWNWOOD DRIVE |
| Add | | | MULBERRY, FL 33860 |
| A Remove 2) Change | President | EMANUEL, KEVIN | 2468 BROWNWOOD DRIVE |
| X Add | | | MULBERRY, FL 33860 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | (Be specific) |
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| an amendment provides for an exch | nange, reclassification, or cancellation of issued shares. |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |

| The date of each amendment(s) ac | option: | , if other than the |
|--|--|--|
| date this document was signed. | | |
| Effective date if applicable: | | |
| | (no more than 90 days after amend | lment file date) |
| Note: If the date inserted in this bidocument's effective date on the De | | ng requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ■ The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors | without shareholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes fficient for approval. | east for the amendment(s) |
| | roved by the shareholders through voting group each voting group entitled to vote separately on | |
| "The number of votes cast | for the amendment(s) was/were sufficient for ap | proval |
| by | (voting group) | . |
| | (voting group) | |
| May 7, 202 | 1 | |
| Signature | lu | |
| selected | rector, president or other officer – if directors or l, by an incorporator – if in the hands of a received fiduciary by that fiduciary) | |
| | Lauren Underwood | |
| | (Typed or printed name of person sig | ning) |
| | Attorney-in-Fact | |
| | (Title of person signing) | · · · · · · · · · · · · · · · · · · · |