P160000 51749

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ASION OF CORPORALIZATION OF STATE

020 MAR 16 AM 8: 17

MAR 30 2020 S. YOUNG

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: $\underline{\ }^{\ }$ KUE KING INC. DOCUMENT NUMBER: P16000051749 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LOVETTE DOBSON Name of Contact Person INCFILE.COM LLC Firm/ Company 17350 STATE HWY 249 STE 220 Address HOUSTON, TX 77064 City/ State and Zip Code EFILE1234@INCFILE.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LOVETTE DOBSON at (855) 829-9090 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

Articles of Amendment

to Articles of Incorporation of

KUE KING INC.

(Name of Corporation as current	y filed with the Florida Dept. of State)				
P16000	0051749				
(Document Number of	f 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:					
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."	4 professional corporation name must contain the word				
B. Enter new principal office address, if applicable:	10876 PEACEFUL HARBOR DRIVE				
(Principal office address MUST BE A STREET ADDRESS)	JACKSONVILLE, FL 32218				
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 add	ress in Florida, enter the name of the				
new registered agent and/or the new registered office address	<u>:</u>				
Name of New Registered Agent	<u> </u>				
(Florida str	eet address)				
New Registered Office Address:	, Florida				
· · · · · · · · · · · · · · · · · · ·	(City) (Zip Code)				
New Registered Agent's Signature, if changing Registered Agent					
hereby accept the appointment as registered agent. I am familiar v					
	with and accept the obligations of the position.				
Signature of New R	egistered Agent, if changing				
Check if applicable The appendment(s) is/are being StLaurence (07,0120 (1))	[78:co				
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), r.S.				

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 Do	<u>oe</u>				
X Remove	<u>V</u>	Mike Jo	<u>nes</u>				
X Add	<u>sv</u>	Sally Sn	<u>nith</u>				
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s		
I) Change		_		<u> </u>	 		
Add						<u> </u>	
Remove							
2) Change		_			 _		
Add							
Remove 3) Change		_			 	<u> </u>	
Add							
Remove							
4) Change		_			 		
Add							
Remove							
5) Change		_			 		
Add							
Remove							
6) Change		_			 		
Add							
Remove							

Attach additional sheets, if necessary)	. (Be specific)			
			 	
		- - <u></u>		
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			 -	
				_
				
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an amendment provides for an ex	change, reclassification	ı, or cancellation of i	issued shares	
provisions for implementing the an	endment if not contai	ned in the amendme	nt itself:	
(if not applicable, indicate N/A)				
				
				
				
				.
		 		

The date of each amendment(s) and this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
парисине.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, to Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	dopted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	ment(s)
☐ The amendment(s) was/were ap must be separately provided fo	oproved by the shareholders through voting groups. The following s r each voting group entitled to vote separately on the amendment(s)	tatement :
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
MARCH 1	2, 2020	
selecte	director, president or other officer—Wdirectors or officers have not ed, by an incorporator—if in the hands of a receiver, trustee, or othe need fiduciary by that fiduciary)	been r court
	JAMES CORBETT GRIFFITH	
	(Typed or printed name of person signing)	
	DIRECTOR/PRESIDENT	
	(Title of person signing)	