## PRICCCC57572

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations NAME OF CORPORATION: Best National Gourmet Markets, Inc. DOCUMENT NUMBER: P16000057572 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wilfredo J Rodriguez Name of Contact Person Best National Gourmet Markets, Inc. Firm/ Company 6767 SW 22 Street Address Miami, Fl 33155 City/ State and Zip Code wiljrod75@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 229-2573

Area Code & Daytime Telephone Number Wilfredo J Rodriguez 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

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

(Additional Copy is enclosed)

## Articles of Amendment to

Articles of Incorporation of

## FILED

Best National Gourmet Markets 2024. JAN 26 PH 4: 33

(Name of Corporation as curren P160000	otly filed with the Florida Dept. of State)  SEURE FART UF STATE  TALLAHASSEE, FL
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	6767 SW 22 Street
(Principal office address MUST BE A STREET ADDRESS )	Miami, Fl 33155
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6767 SW 22 Street
	Miami, Fl 33155
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Check if applicable	

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

Example:

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	<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>Namc</u>	<u>Addres</u> s
1) Change	D/P	Vivian Wright	7145 W 16th Avenue
Add X Remove			Hialcah, Fl 33014
2) Change	VP/D	Angeline Rodriguez	18069 SW 54th Street
Add			Miramar, Fl 33029
X Remove Change	P/D	Wilfredo J Rodriguez	6767 SW 22 Street
X Add			Miami, Fl 33155
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change	<del></del>		
Add			<del></del>
Remove			
6) Change		<u> </u>	
Add			
Remove			

amending or adding additional Artach additional sheets, if necessary).	(Be specific)
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	<del></del>
	A11-1
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-118	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	

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The date of each amendment(s) ado	January 1, 2021	, if other than the
date this document was signed.		, it other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will nortment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, l	etor, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
••	ilfredo J Rodriguez	
<del></del>	(Typed or printed name of person signing)	
Di	rector / President	
	(Title of person signing)	