Jul 24 2017 11:05AM THE FAX 9547844398 p.1 **Division of Corporations** Page 1 of Florida Depártment of States Division of Corporations Electronic Filin Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H17000192922 3))) H170001929223ABC0 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations 1 AH IO: Fax Number : (850)617-6380 From: 00 Account Name : JOHN L. TOMLINSON Account Number : 119980000017 Phone : (954)771-9336 Fax Number : (954)771-9488 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** S TALLENT Email Address: JUL 2 5 2017 COR AMND/RESTATE/CORRECT OR O/D RESIGN Lukug EN 11:24 INTERNATIONAL FOOD GROUP, INC. RACELVED Certificate of Status 0 Certified Copy 0 JUL 24 Page Count 01 Estimated Charge \$35.00

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Articles of Amendment

to Articles of Incorporation

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INTERNATIONAL FOOD GROUP, INC.

(Name	of Corporation as current	ntly filed with the Florida Dept. of Stat	<u>e</u>)
	P160	00096201	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	2.1006, Florida Statutes, th	is Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associd	nation "Corp," "Inc," or	ion," "company," or "incorporated" of "Co" A professional corporation name "P.A."	The new or the abbreviation ne must contain the
B. Enter new principal office address, if applicable:		1920 South Ocean Drive, unit 4C	
(Principal office address <u>MUST BF: A S</u>	(Principal office address <u>MUST BF: A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		1920 South Ocean Drive, unit 4C	SSET DE
		Hallandale, FL 33009	D B
		· · · · · · · · · · · · · · · · · · ·	50 S
D. If amending the registered agent an new registered agent and/or the new	id/or registered office ad- w registered office addre	dress in Florida, enter the name of the	
Name of New Registered Agent	John L. Tomlinson		
	41 Cayuga Road		
	(Florida s	reet address)	
New Registered Office Address:	Sea Ranch Lakes	, Florida	3308
	(City)		(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Som	S. Jonlinson	
\mathcal{O}	Signature of New Registered Agent, if changing	

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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>PŢ</u>	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>şv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			. <u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Aċd			
Remove			

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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: (if not applicable, indicate N/A)

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The date of each amendment(s) ad date this document was signed.	loption:	if other than the
2		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were sub	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.)
	roved by the sharcholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	71
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adop action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required. Dated	pted by the incorporators without shareholder action and shareholder 12412017 S. S. S	
	(Typed or printed name of person signing)	
	Director	
-	(Title of person signing)	

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