0DDIDD

(Requestor's Name)	
(Address)	600296040756
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	600296040756 03/06/1701023005 **43.75
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	2017 HAR -6 PM 2: 00 SECOTION SECONDALISMAN SECONDALISMAN SECOND SECONDALISMAN SECONDA
I	l .

Office Use Only

MAR 8 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: BREAD & BREA	D CORP	
DOCUMENT NUMBER:	P16000100480		
The enclosed Articles of Art	nendment and fee are su	abmitted for filing.	
Please return all correspond	ence concerning this ma	tter to the following:	
MA	ARIA F DIAZ		
		Name of Contact Person	n
M	ARIA F DIAZ CPA LLO	C	
		Firm/ Company	
2250	NW 136 AVE SUITE 1	17	
	<u></u>	Address	
PEM	BROKE PINES, FL 33	028	
		City/ State and Zip Cod	e
MDCRA@	BELLSOUTH.NET		
		sed for future annual report	notification)
	E man address. (10 be as	sed for fatare amidat report	nomentony
For further information con-	cerning this matter, pleas	se call:	
MARIA F DIAZ		at (954	499-2829
Name of Co	ntact Person		de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division o P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

BREAD & BREAD CORP

DREAD & BREAD COR		- 52 A - 3 0
(Name of Corpo	oration as currently filed with the Florida Dept. of State)	
P16000100480		
(De	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Fleits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the foll	lowing amendme
A. If amending name, enter the new name of th	ne corporation:	
		The new
	word "corporation," "company," or "incorporated" or to Corp," "Inc," or "Co". A professional corporation name in the abbreviation "P.A."	he abbreviation
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	(BOX)	
D. If amending the registered agent and/or reg new registered agent and/or the new registe	istered office address in Florida, enter the name of the red office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age.	Registered Agent: nt. I am familiar with and accept the obligations of the posit	tion.
	Signature of New Registered Agent, if changing	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	VP	BENNO TROSS	-
Add			
Remove			
2) X Change	S	ALINE FERNANDES	
Add			
Remove	D	LUCCAS SADADOTTO CADOLA	15811 COLLINS AVE #2406
3) Change	P	LUCCAS SABADOTTO GARCIA	
X Add			SUNNY ISLES, FL. 33160
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional	dding additional Ai sheets, if necessary)). (Be specific)	1			
		<u> </u>				
			•			
						,
					* * ***	

provisions for it	provides for an exc nplementing the an	nendment if not	fication, or cand	cellation of issue amendment its	ed shares, self:	
(if not appli	cable, indicate N/A)					
			"			

	than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	ed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
2/23/2017	
Dated	
Signature * Second Signature	
(By a director, president or other 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 fiduciary)	
Benny Tross	
(Typed or printed name of person signing)	•
Vice President (Title of person signing)	