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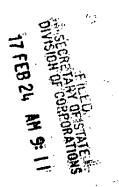
(Re	questor's Name)	
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FEB 27 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: B&N FOOD MAI	REINC
DOCUMENT NUMB	BER: P17000000928	
The enclosed Articles	of Amendment and fee are sul	omitted for liling.
Please return all corres	pondence concerning this mat	ter to the following:
		DONNA ROBBINS
•		Name of Contact Person
	BUSI	NESS SERVICE SYSTEMS PA
•		Firm/ Company
	66	00 4TH STREET N, #101
•		Address
	ST I	PETERSBURG, FL 33702
•		City/ State and Zip Code
	JIM	WEBERCPA@AOL.COM
<u>.</u>	E-mail address: (to be us	ed for future annual report notification)
	concerning this matter, pleas	727 520-8652
Name o	f Contact Person	at (at (
Enclosed is a check for	the following amount made p	ayable to the Florida Department of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

B & N FOOD MART INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P17000000928

		The second secon
	(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Co</i>	rporation adopts the following amendmen
A. If amending name, enter the new nam	e of the corporation:	
		The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	in the word "corporation," "company," ion "Corp," "Inc," or "Co". A profession," or the abbreviation "P.A."	or "incorporated" or the abbreviation nal corporation name must contain the
B. Enter new principal office address, if (Principal office address MUST BE A STI		
C. Enter new mailing address, if applica	ıble:	
(Mailing address <u>MAY BE A POST O</u>	FFICE BOX)	
	<u> </u>	
D. If amending the registered agent and new registered agent and/or the new	or registered office address in Florida, en	ter the name of the
Name of New Registered Agent	KHALED T HOBBALLAH	
Ivame of New Registered Agent	1414 PINEHURST ROAD	
-	(Florida street address)	<u> </u>
New Registered Office Address:	ST PETERSBURG	, Florida
The Registre of the Transpas.	(City)	(Zip Code)
New Registered Agent's Signature, if cha		
I hereby accept the appointment as register	ed agent. I am familiar with and accept the	obligations of the position.
	A THE	
- 1111111111111111111111111111111111111	Signature of New Registered Agent, ij	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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	ALI TAJEDDINE	1414 PINEHURST ROAD
Add			DUNEDINE, FL 34698
X Remove			
2) X Change	P	KHALED T HOBBALLAH	1414 PINEHURST ROAD
Add			DUNEDINE, FL 34698
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addition</i>	adding additional Articles, end of sheets. if necessary). (Be sp	recific)		
 				 .
				
				
				
· ·· ·				
				
	W. (1) - (1)			
				
·,				
<u>orovisions for </u>	t provides for an exchange, remplementing the amendment icable, indicate N/A)	eclassification, or cancel if not contained in the a	lation of issued shares, mendment itself:	
· · · · · ·				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	2/10/2017	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date we Department of State's records.	rill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	2.21.17	
Signature	CKIII)	
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	_
	KHALED T HOBBALLAH	
	(Typed or printed name of person signing)	
	VICE-PRESIDENT	
	(Title of person signing)	