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| PICK-UP | WAIT MAIL | | | | |
| (Business Entity Name) | | | | | |
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| Certified Copies | Certificates of Status | | | | |
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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: THAT'S JUST SWEET INC | | | | | |
|--|--|--|--|--|--|
| DOCUMENT NUMBER: <u>P17000007534</u> | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Susan L. Boni Name of Contact Person That's Just Sweet Inc Firm/ Company 4103 Parm forest Dr. N Address Delray Perch FL 33445 City/ State and Zip Code E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: Swan Bon at 954 907-775> | | | | | |
| Name of Contact Person Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee | | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

| THATS JUST SWEET INC |
|---|
| (Name of Corporation as currently filed with the Florida Dept. of State) |
| P17000007534 |
| (Document Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation: |
| The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Delany Beach, FL 33445 |
| 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 address in Florida, enter the name of the rew registered agent and/or the new registered office address: |
| Name of New Registered Agent SUSAN L. BONI OF B 4103 PALM FOREST DO AUGUST |
| New Registered Office Address: De Rian Beine H Florida 33/45 (City) |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. |
| 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change | <u>PT</u> | John Doc | | | | | |
|----------------------------|--------------|-------------|----------------|--------------|-------------|-----------------|----|
| X Remove | <u>v</u> | Mike Jones | | | | | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | | | | | |
| Type of Action (Check One) | <u>Title</u> | <u>Na</u> | | | | Address | |
| 1) Change | VP | - I | ROBIN | L. 5 | Bervidio | BUYNTON BENDLA, | Dr |
| Add Remove | | | | | | BUYNTON BENDIA, | FL |
| 2) Change | · · = · · · | | | | | | |
| Add Remove | | | | | | | |
| 3) Change | | | . . | | | | |
| Add | | | | | | | |
| 4) Change | | | | | | | |
| Add | | | | | | | |
| 5) Change | | | | | | | |
| Add | | | | | | | |
| 6) Change | | | | , | <u></u> | | |
| Add Remove | | | | | | | |
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| | exchange, reclassificat | ion, or cancellation of i | ssued shares. | |
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| The date of each amendment(s) adoption:date this document was signed. | 5/1 | 12018 | , if other than the |
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| Effective date if applicable: | more than 90 day | s after amendment file o | datel |
| (110) | more man strauge | s agree amenament pire s | ••••• |
| Note: If the date inserted in this block does not med document's effective date on the Department of State's | | statutory filing requirer | ments, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK | <u>ONE</u>) | | |
| ☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv | | ber of votes east for the | amendment(s) |
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| ☐ The amendment(s) was/were adopted by the board action was not required. | of directors witho | out shareholder action a | nd shareholder |
| The amendment(s) was/were adopted by the incorpaction was not required. | orators without sh | hareholder action and sl | hareholder |
| Dated | 7 | -0 | |
| Signature Signature | MOUNT | <u> </u> | |
| By a director, president of | | | |
| /selected, by an incorpora appointed fiduciary by the | | ds of a receiver, trustee. | , or other count |
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| (Type | d or printed name | of person signing) | |
| Pres | sident | | |
| | (Title of per | rson signing) | |

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