P11000025139

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u></u>
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORA	TION:JUDY'S BAKI	ERY 1 CORP			
DOCUMENT NUMBER	D17000035130				
The enclosed Articles of	Amendment and fee are su	bnitted for filing.			
Please return all correspo	ndence concerning this ma	tter to the following:			
Re	OBERTO VILLAVICENC	EIO			
	Name of Contact Person				
		Firm/ Company			
18	50 S OCEAN DR				
		Address			
H	ALLANDALE BEACH FI	. 33009			
		City/ State and Zip Cod	e		
	E-mail address: (to be u	sed for future annual report	notification)		
		·			
For further information co	oncerning this matter, pleas	se call:			
ROBERTO VILLAVICI	ENCIO	954 at (531-8029		
Name of C	Contact Person	at (954)s31-8029 Area Code & Daytime Telephone Numb			
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Amend Divisio P.O. Bo	<u>a Address</u> ment Section n of Corporations ox 6327 ssec, FL 32314	Amenc Divisio Cliffon	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301



JUDY'S BAKERY 1 CORP	
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P17000025139	
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or word "chartered," "professional association," or the abbreviatio	tion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	22
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	U
	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addr	
	
Name of New Registered Agent	
	street address)
	street address)
New Registered Office Address:	, Florida (City)
	ic nyi
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	e <mark>nt:</mark> ar with and accept the obligations of the position.
	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Signature of Nev	w 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>\\'</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	Р	VIRGINIA PEDRAZA COLMENARES	1850 S OCEAN DR
X Add			HALLANDALE BEACH FL 3300
Remove			
2) Change	P	JUDY QUINTANA	1850 S OCEAN DR
Add			HALLANDALE BEACH FL 3300
X Remove			
3.) Change	VP	ROBERTO VILLAVICENCIO	1850 OCEAN DR
Add			HALLANDALE BEACH FL 3300
X Remove			
4) Change			
Add			***
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Be specific)
·····	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
, <u>, , , , , , , , , , , , , , , , , , ,</u>	

The date of each amendment(s) adoption:	, if other 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 wil document's effective date on the Department of State's records.	I not be listed 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 cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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. Dated 2/7 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) Pobe Ato VIVAUCENCIC (Typed or printed name of person signing)	
Paesidant	
(Title of person signing)	

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