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R. WHITE

## COVER LETTER

**TO:** Amendment Section Division of Corporations

ð,

NAME OF CORPOR	ATION: REDLAND ICE C	REAM & BAKERY COR	P	
DOCUMENT NUMB	P17000043679			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	condence concerning this ma	tter to the following:		
1	MARIBIS AGUION ESCOP	BAR		
-		Name of Contact Persor	1	
-		Firm/ Company	_	
:	24810 SW 177 AVENUE			
_	Address			
] -	HOMESTEAD, FL 33031	City/ State and Zip Code		
For further information	E-mail address: (to be us concerning this matter, pleas	sed for future annual report se call:	notification)	
MARIBIS AGUION E	SCOBAR	at (	de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made [	payable to the Florida Depa	iriment 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)	
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle USSEC, F1, 32301	

## Articles of Amendment to Articles of Incorporation of

77 17 1 1 1 1 1 7 9

REDLAND ICE CREAM & BAKERY, CORP

( <u>Name o</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	
P17000043679			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the fo	flowing amendment(s)
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or "Co". A professional corporation name "P.A."	the abbreviation
D. C.	if a mati and lac	N/A	
B. Enter new principal office address. (Principal office address MUST BE A S			
C. Enter new mailing address, if appli	cable:		
(Mailing address <u>MAY BE A POST (</u>		N/A	
D. If amending the registered agent an			
new registered agent and/or the new	<del>v registered office addre</del> Maribis aguion es		
Name of New Registered Agent		JODAK	
<u>маше от меж кодіметса муст</u>			
Name of New Registerea Agent	24810 SW 177 AVENU		
<u>Name oj New Reginerea Agem</u>	(Florida :	E treet address)	
New Registered Office Address:	-	treet addressi	3031 (Zip Code)

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;  $V \in V$  ice President; T = T reasurer; S = S ecretary; D = D irector; TR = T rustee; C = C hairman or C lerk; CEO = C hief Executive Officer; CFO = C hief 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.

X Change	PT	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	$\underline{SV}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	OSMARY J VIVES RODRIGUEZ	13400 SW 260 STREET
Add			HOMESTEAD, FL 33032
X Remove			
2) Change	þ	MARIBIS AGUION ESCOBAR	24810 SW 177 AVENUE
X Add			HOMESTEAD, FL 33031
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
OCCUPANT C			

E. <u>If amendi</u> (Attach <i>ada</i>	ng or adding additional Art ditional sheets, if necessary),	icles, enter change(s (Be specific)	s) here:		
N/A					
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F. Ifan ame	ndment provides for an exc	hange reclassificati	on or cancellatio	n of issued shares	
provision	as for implementing the amo	endment if not conta	ined in the amen	dment itself:	
(if ne	ot applicable, indicate $N(A)$				
N/A					
		. <u>-</u> .			<u> </u>

The date of each amondment	. 07/12/2017	if other than the
The date of each amendment date this document was signed		If other than the
C.C	07/12/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/wei by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
	/2017	
Dated		
Signature	Duio	
( ) <sup>1</sup> Se	A director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	
	MARIBIS AGUION ESCOBAR	
	(Typed or printed name of person signing)	<del></del>
	VP	
	(Title of person signing)	