PITCOUNTELLO

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900306064139

12/18/17--01012--009 **43.75

2017 DEC 18 PH 4: 07

C. GOLDEN

DEC 1 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Food, F	un & Fla	VOR C	0 ·	
DOCUMENT NUMBER:					
The enclosed Articles of Amena	Iment and fee are su	bmitted for filing.			
Please return all correspondence	concerning this ma	tter to the following	ng:		
Firm	7	Addre (And OLAKe City/ State and	EFIAN mpany na tay sss ex FL I Zip Code	OR CO. YACE. 34638 WOK-COM otification)	
For further information concern	ing this matter, pleas	se call:			
Asnler	DAVIS	at (305) 773 7204 & Daytime Telephone Number	_
Name of Contact					
□ \$35 Filing Fee \$354 Ce	3.75 Filing Fee & ertificate of Status	□\$43.75 Filing Certified Cop (Additional co- enclosed)	рy	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Add Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		Division Clifton E	ent Section of Corporations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

Articles of fact	n por action
of	2017 DEC 18- PH 4: 07
Food, Fun & F	TALVE CO.
	filed with the Florida Dept. of State)
↑17ggb047g (Document Number of	66
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	Aloo Welling terrace
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	and other for 34030
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4100 weing terrace
	Land OLAKEY FL 34634
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	ret address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar w	
Tam jamian n	an una accept the trinigations of the position.
Signature of New Ro	egistered 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: XChange	<u>PT</u>	John Doe	
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>Name</u>	<u>Addres</u> s
1) Change	<u>Sec</u>	_ Christina Gogar	4510 MITCHEURD. Land OLFKY FC 34638
Add		V	Land oftky FC 34638
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

xttach <i>additic</i>	or adding addition on all sheets, if necessity of the contract			ets) here:				
Av-	trle TI Handr	→	Durbos	Lor 1	unich Hin	(101000 CHi)	on is orown	51.0 ×
	114-4		1 1 1 2		<u> </u>	J_C9-7221_2		190
	<u> </u>	rade g	joodf					
			,				<u>. </u>	
We	no longer	Sell	plante.					
			17.62.7					
							 -	 -
·								
					*			
		-						
							- <u>-</u>	
	<u>-</u> .							
	nent provides for or implementing							
	pplicable, indicate		ment ii not to	Kumeu m	tue amenome	iii iiseii.		
-			_					
	_ _		_ _ _					
			 _					
- <u>-</u>								
						,		
								

The date of each amendment(s) adoption:late this document was signed.	, if other than the
-	
Effective date if applicable: 12 13 17 (no more than 90 days after an	nendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of vo by the shareholders was/were sufficient for approval.	tes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient for	r approval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without sharel action was not required.	holder action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholde action was not required.	er action and shareholder
Dated 12 13 17	
Signature MMVI W	
(By a director, president or other officer + if directo	rs or officers have not been
selected, by an incorporator – if in the hands of a re appointed fiduciary by that fiduciary)	ceiver, trustee, or other court
Ashley DA	vis
(Typed or printed name of person	n signing)
Prejiden (Title of person sign)	
(Title of person sign)	ine)