P170000 86921

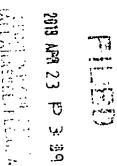
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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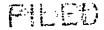
TO: Amendment Section Division of Corporations

| NAME OF CORPOR | CARE FOOD MA | RT INC | | | |
|--------------------------------------|---|--|--|--|--|
| | P17000086921 ER: | | | | |
| | | | | | |
| The enclosed Articles of | of Amendment and fee are sul | bmitted for filing. | | | |
| Please return all corres | pondence concerning this mat | ter to the following: | | | |
| | EFRAN AHMED | | | | |
| - | Name of Contact Person | | | | |
| - | Firm/ Company 2982 Tennis Club Dr 200 | | | | |
| - | | | | | |
| | Address West Palm Beach, FL 33417 | | | | |
| - | | City/ State and Zip Cod | e | | |
| | | | | | |
| - | E-mail address: (to be us | ed for future annual report | notification) | | |
| For further information | concerning this matter, pleas | e call: | | | |
| Efran Ahmed | | 561 at (| 809-6962 | | |
| Name of Contact Person Area Code & I | | de & Daytime Telephone Number | | | |
| Enclosed is a check for | the following amount made p | payable to the Florida Depa | artment 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) | | |
| Ame Divis P.O. | ing Address Indment Section Identified of Corporations Box 6327 hassee, FL 32314 | Amend Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CARE FOOD MART INC



| (Name of Corporation as current P17000086921 | tly filed with the Florida Dept. of State) 3 29 |
|--|--|
| (Document Number | of Corporation (if known) T.D. Art. W. S.D |
| Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation: | |
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the |
| * * | EFRAN AHMED |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 2982 Tennis Club Dr 200 |
| | West Palm Beach, FL 33417 |
| C. Enter new mailing address, if applicable: | EFRAN AHMED |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 2982 Tennis Club Dr 200 |
| | West Palm Beach, FL 33417 |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre | |
| Name of New Registered Agent | |
| | |
| (vioriau) | street address) |
| New Registered Office Address: | (City) , Florida (Zip Code) |
| | (City) (7.1p Code) |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia. | |
| | |
| Sionature 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 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 | <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> | Name | <u>Addres</u> s |
| 1) Change | P | MD RANA | 1850 N CONGRESS AVE APT F 3 |
| Add | | | WEST PALM BEACH, FL 33401 |
| X Remove | | | |
| 2) Change | VP | JUBAIDA CHANDNI | 1850 N CONGRESS AVE APT F 3 |
| | | | WEST PALM BEACH, FL 33401 |
| X Remove | | | |
| 3) Change | | | |
| | | | • |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f amending or adding additional Artic Attach additional sheets, if necessary). | |
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| provisions for implementing the amer | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
| | · · · · · · |
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| | |

| The date of each amendment(s) adoption: | , if other than the |
|--|--------------------------|
| date this document was signed. | |
| Effective date <u>if applicable</u> : (no more than 90 days after amendment file date) | |
| (no more man 20 days after amenament fre date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records. | will not be listed as th |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) | |
| ☐ 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): | ı |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by | |
| (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. | |
| April 19, 2019 | |
| 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) EFRAN U AHMED | |
| BERAIN O ADIMED | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |
| (Title of person signing) | |