P18000001072

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SECRETARY OF STATE

O Kinsey

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:REAS	EY DOUGHN	UTS INC		
DOCUMENT NUMBER	:P18000001072				
The enclosed Articles of A	mendment and fee are so	ubmitted for fil	ing,		
Please return all correspon	dence concerning this ma	itter to the follo	owing:		
SRE	EYNY SOURN				
		Name of C	ontact Perso	n	
REA	ASEY DOUGHNUTS IN	VC			
		Firm/ (Company		
202	E CANAL ST				
 -		Λd	dress		
MU	LBERRY, FL 33860				
		City/ State	and Zip Cod	e	
	E-mail address; (to be u	sed for future a	nnual report	notification)	
			imaai rejxiit	nonneactory,	
For further information cor	ocerning this matter, pleas	se call;			
SREYNY SOURN		at (224	de & Daytime Telephone Number	
Name of Co	intact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made	payable to the I	Florida Depa	irtment of State;	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ((Additiona enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Street	Address	
	ent Section	Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations			
Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

REASEY DOUGHNUTS INC

KEASET BOOGHNOTS INC	
(Name of Corporation as currently filed with the Florida Dept. of St.	ate)
P18000001072	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts thits Articles of Incorporation:	ne following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must he distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation neword "chartered," "professional association," or the abbreviation "P.A."	The new or the abbreviation ame must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SE 201
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	IS JUN -3 ANTI: 24 INCLAHASSEE. FLE
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	e
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florid	a
(City)	(Zip Code)
Name of New Registered Agent (Florida street address)	a(Zip Code)
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 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change	VP	SAREN UM	2010 BERRY RD
Add			PLANT CITY, FL 33567
X Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			-
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ng additional Arti tets, if necessary).	(Be specific)			
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an amendment pro	vides for an excha	inge, reclassificat	ion, or cancellatio	on of issued share	<u>es,</u>
provisions for iminle	, indicate N/A)	dinent it not cont	amed in the amer	iument itseit:	
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The date of each amendment(s) adoption:	3-29-19	if other than the
date this document was signed.	- To 10	
Effective date if applicable:	5-29-19	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, this date f State's records.	will not be listed as the
Adoption of Amendment(s) (CI	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amendment(s) approval.	
☐ The amendment(s) was/were approved by the must be separately provided for each voting	te shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	1
"The number of votes east for the ame	ndment(s) was/were sufficient for approval	
by		
(vo	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
Dated	5-29-19	
Signature		
(By a director, pres selected, by an inco appointed fiduciary	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
	Skeyny Sourn Typed or printed name of person signing)	
	Typed or printed name of person signing)	
	Presidet	
	(Title of person signing)	-