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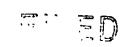
C GOLDEN SEP 1 9 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: 911 FOOD SERVI	CES CORP	
DOCUMENT NUMI	BER: P18000004803		
	of Amendment and fee are su	ebmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Osmel Martinez		
		Name of Contact Perso	n
		Firm/ Company	
	13382 sw 143 ter		
	miami, 11 33186	Address	
		City/ State and Zip Cod	e
911fo	odservices@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Osmel Martinez	٠	at (333-8274
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation



911 FOOD SERVICES CORP

2019 STP -9 AM 8: 3:

(Name of	Corporation as currently filed with the Florida Dept. of State)
P18000004808	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment
A. If amending name, enter the new name	e of the corporation:
	The new n the word "corporation," "company," or "incorporated" or the abbreviation ion "Corp," "Inc," or "Co". A professional corporation name must contain the n," or the abbreviation "P.A."
B. Enter new principal office address, it a (Principal office address MUST BE A STR	
1	
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	
D. If amending the registered agent and/onew registered agent and/or the new r	or registered office address in Florida, enter the name of the registered office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
·	(and)
New Registered Agent's Signature, if char hereby accept the appointment as registere	nging Registered Agent: ed agent.—I am familiar with and accept the obligations of the position.
· ·	
	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, a 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 = Constitute Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Dava	
		John Doe	
X Remove	<u>V</u>	Mike sones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	MORERA, JAVIER	13382 SW 143 TER
Add			MIAMI, FL
X Remove		:	33186
2)Change	Р	OSMEL MARTINEZ	13382 SW 143 TER
XAdd		! 1	MIAMI, FL
Remove			33186
3) Change			
Add			
Remove		•	
4) Change			
Add		ļ	-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		· 	
Remove		i	

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
,	
	· · · · · · · · · · · · · · · · · · ·
;	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
SHARES TO BE AS FOLLOW:	
OSMEL MARTINEZ: 100% OF SHARES	
	7.0

•	:, if other than
date this document was signed. 08/31/2019	
Effective date if applicable:	
 }	(no more than 90 days after amendment file date)
Note: If the date inserted in this block date document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not be listed as it of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
	by the shareholders through voting groups. The following statement ofting 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)
action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
08/31/2019 Dated	
	<u></u>
selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court giary by that fiduciary)
OSME	L MARTINEZ
 -	(Typed or printed name of person signing)
PRES	DIENT
	(Title of person signing)