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I ALBRITTON

COVER-LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	sh Meal 365 Corp.
DOCUMENT NUMBER: P 18 e	000 19096
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Al	exis Martinez Name of Contact Person
Frest	n Meal 365 Corp.
	Firm/ Company
3+00	Oaks Clubhouse Dr. #102
Pom 00	NO Beach, FL 33069 City/ State and Zip Code
	City/ State and Zip Code
ale	x @ freshmeal 365. Com
	be used for future annual report notification)
For further information concerning this matter,	please call:
Alex Martine 3	at (561), 255-8096 Area Code & Daytime Telephone Number
O	
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:
\$35 Filing Fee Certificate of State	
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Fresh Mes	365 (Drp.			
(Name of Corporation as current	ly filed with the Florida Dept. of State)			
P 8 0000 90 96 (Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:				
	The new			
name must be distinguishable and contain the word "corporatio" "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 P.A.			
B. Enter new principal office address, if applicable:	3700 Oaks Chibhouse Dr. #10			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Pompano Beach, FL33069			
C. Enter new mailing address, if applicable:	3700 Oaks Clubhouse Dr. #102			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
	Pompano Beach, FL 33069			
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres				
new registered agent and/or the new registered office addres	<u>,</u>			
Name of New Registered Agent	The state of the s			
	<u> </u>			
(Florida st	reet 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	with and accept the obligations of the position.			
Signature of New I	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:	ove, and baily binin	, D7 60 60 71 60 60 .	
X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP_	Sung Mo ShiN	1280 South Paworline Rd #: Pompano Beach, F1 33069
Add		,	Pomparo Beach, FL 33069
Remove			
2) Change	CFO	Cecilia ShiN	1280 South Howerline Rd+21 Prompano Beach, FL33069
Add			rompano beach, FL 33069
Remove			
3) Change			
Add			*
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
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<u>If an amendment provides for an exch</u>	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	adment it not contained in the amendment itself.
provisions for implementing the amer (if not applicable, indicate N/A)	nument it not contained in the amendment usen:
provisions for implementing the amer	nument it not contained in the amendment users.
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provisions for implementing the amer	nument it not contained in the amendment riself.

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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):	
"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.	
Dated	
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)	
Suna Mo Shir	
(Typed or printed name of person signing)	<u></u>
$\bigvee \mathcal{P}$	

(Title of person signing)