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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_ J R 2628 FOOD INC.

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATHERINE M. RAMIREZ

Name of Contact Person

J R 2628 FOOD INC.

Firm/ Company

15488 SW WARFIELD BLVD.

Address

INDIANTOWN, FL 34956

City/ State and Zip Code

DOCUMENTS@IBSTAX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATHERINE M. RAMIREZ	at (
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State.

\$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status X \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of J R 2628 FOOD INC.

## (Name of Corporation as currently filed with the Florida Dept. of State) P18000035003

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

## A. If amending name, enter the new name of the corporation:

N/A			. Ill and a - LL		he new	
name must be distinguishable and contain th "Inc," or Co." or the designation "Cou "chartered," "professional association," o	ър, ""Inc," or "Co"	A projessional corporal	ated" or the abou ion name must	contain	the word	
B. <u>Enter new principal office address, if</u> (Principal office address <u>MUST BE A STI</u>	<u>applicable:</u> R <u>EET ADDRESS</u> )	N/A				
				 	2021	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		N/A				
D. If amending the registered agent and	for registered office add	dress in Florida, enter t	he name of the	•		
new registered agent and/or the new	registered office addres	<u>u:</u>				
Name of New Registered Agent	KATHERINE M. RAMIR	NEZ				
	15488 SW WARFIELD	BLVD.				
-	(Florida s	treet address)				
	INDIANTOWN		Florida	34956	L	
New Registered Office Address:	(City)		, , ,	(Zip Co	de)	

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

## 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.

TYT

John Dog

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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One)	PSTD	YECENIA MARTINEZ	3915 TORRES CIRCLE
1) Change			WEST PALM BEACH, FL 33409
Add			
X Remove	PSTD	KATHERINE M. RAMIREZ	130 CANTERBURY PL
2) Change	-310		ROYAL PALM BEACH, FL 33414
_X_Add			
3) Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		-	
Remove			
6) Change			
Add			
Remove			

# E. <u>If amending or adding additional Articles, enter change(s) here</u> (Attach additional sheets, if necessary) (Be specific)

N/A

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F. If an amendment provides for a	n exchange, reclassific:	ition, or cancellation	of issued situtes,	
provisions for implementing th	e amendment if not co	ntained in the amend	ment itself:	
(if not applicable, indicate N	//A)			
(g not applicable, matches				
RECLASSIFICATION OF SHARES:	<u> </u>			<del>.</del>
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	01/01/2021	, if other than
The date of each amendment(s) ac	loption:	
tate this document was signed.	01/01/2021	
Effective date if applicable:	01/01/2021 (no more than 90 days after amendment file da	(e)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records	ents, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
action was not required.	opted by the incorporators, or board of directors without shar	
I The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the a ufficient for approval.	amendment(s)
must be separately provided for	proved by the sharcholders through voting groups. The follor r each voting group entitled to vote separately on the amendr t for the amendment(s) was/were sufficient for approval	wing stalement neni(s):
by	(voting group)	
Dated	/	
Signature	4	
(By a	director, president or other officer - if directors or officers ha	ave not been
select	director, president or other officer = if affective of officer and ed, by an incorporator = if in the hands of a receiver, trustee, inted fiduciary by that fiduciary)	of other court
	(Typed or printed name of person signing)	
		1
	PRESIDENT	·····
	(Title of person signing)	