P18000054842

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2010 AUG 12 P # 52 SECON DARY OF SCALO

AUS 15 2027

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	NTION: 1300 NO	5 192m 2+ +	1002 (U/P.	
DOCUMENT NUMBE	18 0000 S	54342		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		•
Please return all corresp	ondence concerning this ma-	ter to the following:		
_	Ange	Name of Contact Person	2- Minaya	_
_	1300 NE	135th St. Fo	2- Minaya Sd Curp.	
-				_
_	North Min	City/ State and Zip Code	2	_
·	St. Morde 280 E-mail address: (to be us			
For further information	concerning this matter, pleas	e calt:		
Julia Mane of	Contact Person	at (994 Area Co) 391-6296 or de & Daytime Telephone Numb	954-937-313
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)	
Amen Divisi	ng Address dment Section ion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

	to		
	Articles of Incorporation of		the the state of
1300 NE 125	th ST FOOD	CORP	
	ation as currently filed with th	e Florida Dept. of S	tate - -
<u> </u>	54842		1 3 ton the L
(Doc	cument Number of Corporation (if known)	1019 AUG 12 P 4 5
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Profit</i>		he following ուրցովորչուն RELAHASSEE, FLORIO
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A profe	;" or "incorporated ssional corporation i	" or the abbreviation name must contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Fatan and million address if analisables			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		
	· 		_
D. If amending the registered agent and/or registered agent and/or the new register		<u>, enter the name of t</u>	t <u>he</u>
Name of New Registered Agent			
	-		
	(Florida street address)		
V 9 1 100 411		rål	· •.
New Registered Office Address:	(Cuy)	, Flor	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		a the obligations of th	a position
і неголу ассерь ніс арронитені их годімегой аден	а г ат затаваг жин ини иссер	eric oraginais of th	с ромион.
	•		
S	ignature of New Registered Ages	nt, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nam 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. The 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 Che Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u>	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>Address</u>
1) Change	_V_	Stophanic Hordet	5305 TYLW St.
Add			142/14/2021 FC- 3302/
Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	
•	
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	·

The date of each amendment(s) adoption:	, if other the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 dat document's effective date on the Department of State's records.	e will not be listed a
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.	ı
☐ 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):	11
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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 8/1/19	
Signature Are live live live (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)	
(Typed or printed name of person signing)	
President (Title of person signing)	