

(Re	questor's Name)	<del>-</del>
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	<u></u>
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300317295333

08/22/18--01020--002 \*\*35.00

And

R. WHITE AUS 24 2013

FILED 2018 AUG 22 PM 1: 56 SECRETARY OF STATE TALLAHASSEF, PA



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: URBAN FARMS	KITCHEN, INC		
DOCUMENT NUMBI	ER: P18000070913			
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
J	ASON CHOY			
_		Name of Contact Persor	1	
Ţ	URBAN FARMS KITCHEN, INC			
-		Firm/ Company	<del>-</del>	
:	2875 NE 191TH ST SUITE :	500		
_		Address	<u></u>	
,	AVENTURA FL 33180			
_		City/ State and Zip Code	2	
JCHO'	Y@BLKTIEEVENTS.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information  JASON CHOY	concerning this matter, pleas	954	2607570	
Name of	Contact Person	at ( Area Co	de & Davtime Telephone Number	
	the following amount made		•	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis P.O.	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

## FILED

URBAN FARMS KITCHEN, INC

2018 AUG 22 PM 1: 56

	60	El 1 (de al - El 11 Dans - EStata)	
(Name o	of Corporation as currently I	filed with the Florida Delger State) RY OF STATE TALL AHASSEE, FL	
P18000070913			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this Fl	Torida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new na	ime of the corporation:		
		The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	" "company," or "incorporated" or the abbreviation of the Aprofessional corporation name must contain the	
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S			
C. Enter new mailing address, if appli	icable;		
(Mailing address MAY BE A POST)			
D. If amending the registered agent an		ess in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	JASON CHOY		
	7668 MUNICIPAL DR		
	(Florida stree	et address)	
Now Designated Offices (d. beson	ORLANDO	Florida 32819	
New Registered Office Address:		City) (Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:	the state of the state of the marking	
I hereby accept the appointment as regist	tered agent. I am familiar wi	ith and accept the obligations of the position.	
		Olax	
	Signature of New Res	gistered fgent, 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	P		MEGAN FOX	7668 MUNICIPAL DR
Add X Remove				ORLANDO, FL 32819
2) Change	Þ		JASON CHOY	7668 MUNICIPAL DR
X Add				ORLANDO, FL 32819
Remove				
3 ) Change				
Add				
Remove				
4) ' Change	<u> </u>	<del></del> -		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

•	08/20/2018	, if other than the
The date of each amendment(s) addate this document was signed.	option:	, ii outer man us
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendme ficient for approval.	nt(s)
☐ The amendment(s) was/were appropriate to be separately provided for a	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	8/21/18	
Signature	Man Kox	
(By a di	rector, president or her officer – if directors or officers have not be	en
	l, by an incorporator – if in the hands of a receiver, trustee, or other ced fiduciary by that fiduciary)	burt
ă	(Typed or printed name of person signing)	-
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	