## P19000081695

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CC&S WEST IND	IAN FOOD MARKET INC	C
	ER: P19000081685		
	f Amendment and fee are su		
lease return all corresp	nondence concerning this ma	tter to the following:	
	ADEN SMITH		
-	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
-		Firm/ Company	
	8079 NW 27TH AVE		
-		Address	
:	MIAMI GARDENS, FL 330:	56	
-		City/ State and Zip Code	e
j	adensmith1028@gmail.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea-	se call:	
JADEN SMITH		at (	273-1933
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section in of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment ŧo. Articles of Incorporation οľ

CC&S WEST INDIAN FOOD MARKET INC

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

P19000081685

(Document Number of Corporation (if known)

<ol> <li>If amending name, enter the new name of the c</li> </ol>	corporation:	
	,	The ne
ame must be distinguishable and contain the word "e Inc.," or Co.," or the designation "Corp," "Inc., chartered." "professional association," or the abbr	;," or "Co". A professional corpo	porated" or the abbreviation "Corp., ration name must contain the wor
3. Enter new principal office address, if applicabl Principal office address <u>MUST BE A STREET AD</u>		
2. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Bo</u>	<u>OX</u> )	
D. If amending the registered agent and/or registe		r the name of the
new registered agent and/or the new registered	d Office accidents	
	Willes account	
	·	
	·	
	(Florida street address)	. Florida
Name of New Registered Agent		
Name of New Registered Agent	(Florida street address)	. Florida
Name of New Registered Agent	(Florida street address) (City) egistered Agent:	Florida(Zip Code)
Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if changing Re	(Florida street address) (City) egistered Agent:	Florida(Zip Code)

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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:

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.

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	JOSEPH SMITH	815 SO. 26TH COURT
Add			HOLLYWOOD, FL 33020
X Remove			18079 NW 27TH AVE
2) Change	P	JADEN SMITH	MIAMI GARDENS, FL33056
X Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			···

If amending or adding additional Arti Atlach additional sheets, if necessary).	(Be specific)		
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		13	
If an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or can	cellation of issued share:	<u>8,</u>
(if not applicable, indicate N/A)	idinent ir not contained in ti	e amenument itsen.	
(y am approximation material control			
	<del></del>		
		<u></u>	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	•	·
Effective date <u>if applicable</u> :	(no more than 90 days after amendn	27 1
	(no more than 90 days after amenan	neni jue date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing epartment of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes extricient for approval.	nst for the amendment(s)
	proved by the shareholders through voting groups, each voting group entitled to vote separately on t	
"The number of votes cast	for the amendment(s) was/were sufficient for app	roval
by		"
	(voting group)	
	rector, president or other officer – if directors or of by an incorporator – if in the hands of a receive	
appoin	ted fiduciary by that fiduciary)	
	JADEN SMITH	
	(Typed or printed name of person sign	ing)
	p	
	(Title of person signing)	