Office Use Only



100346776731

Ubs 30/28 -01038--U15 -+52.53

RECEIVED

JUN 29 2020

AUS 13 MM I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Reginalds Gourme	et Inc.			
	BER: P20000028000				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Carmela DeToma				
		Name of Contact Person			
	Reginalds Gourmet Inc.				
		Firm/ Company			
	1312 Heron Drive				
		Address	· · · · · · · · · · · · · · · · · · ·		
	Orlando, FL 32803				
		City/ State and Zip Code			
	info@reginaldsgourmet.com				
		sed for future annual report	notification)		
For further informatio Carmela DeToma	n concerning this matter, pleas	se call: at (407	493-2262		
Name	of Contact Person	at (Area Coo	le & Daytime Telephone Number		
Enclosed is a check for	r the following amount made		•		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address 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**

EGINALDS GOURMET INC.		
	ration as currently filed with the Florid	la Dept. of State)
P20000028000		
(Doc	cument Number of Corporation (if knows	n)
rsuant to the provisions of section 607.1006, Flor Articles of Incorporation:	rida Statutes, this Florida Profit Corpora	ation adopts the following amendment(
If amending name, enter the new name of the	e corporation:	
ime must he distinguishable and contain the word		
nc.," or Co.," or the designation "Corp." "It hartered." "professional association," or the ab		ition name must contain the word
Enter new principal office address, if applica Principal office address MUST BE A STREET A		
		1 man 2
Enter new mailing address, if applicable:	nov)	<u> </u>
(Mailing address MAY BE A POST OFFICE	<u></u>	
	stered office address in Florida, enter t	the name of the
If amending the registered agent and/or regis		
If amending the registered agent and/or reginew registered agent and/or the new register	ed office address:	•
	ed office address:	
new registered agent and/or the new register		
new registered agent and/or the new register	ed office address: (Florida street address)	, Florida;

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.



Signature of New 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: X Change	<u>PT</u>	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>	<u>Addres</u> s			
1) Change	V	CARMELA DETOMA	1312 HERON DRIVE			
X Add			ORLANDO, FL 32803			
Remove						
2) Change						
Add						
Remove Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

(Attac	nending or ad ch <i>additional</i> .	l <mark>ding additional</mark> sheets, if necessa	i Articles, ent iry). (Be sp	er change(s) t ecific)	nere:		
					יו א		
· · · · · · · · · · · · · · · · · · ·		•		•			
							
							-
							
				-			
		.	· · · · · ·	·			
,							
					٠		
				<u>.</u>			
							,
F. <u>Ifian</u>	amendment	provides for an	exchange, r	eclassification	or cancellation	of issued share:	5 1/1/A
pro	TISIONS TOT THE	ipicinement inc	amendmen	if not contain	ed in the amend	ment itself:	* N/H
	(іј пот аррис	able, indicate N/	A)				
							
	·-						

The date of each amendment(s)	06/24/2020 adoption:	if other than the
date this document was signed.	<u></u>	. If outer than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendn sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
06/25/20	70	
Dated		
Signature	A	
(By a selec	director, president or other officer – if directors or officers have not b ted, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	
	Sugumar Periasamy	
	(Typed or printed name of person signing)	
	President	•
	(Title of person signing)	