Ph0000045598

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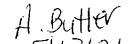
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2021 HAR 26 PH 4: 09

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.COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	LAKE NONA FAR	RM FOOD CORP.	
DOCUMENT NUMBER:	P20000045598		
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
CESAR RA	MIREZ		
		Name of Contact Persor)
LAKE NON	A FARM FOOD COR	IP	
		Firm/ Company	
13024 NAR	COOSSEE ROAD		
		Address	_
ORLANDO,	FL 32832		
	-	City/ State and Zip Code	2
000145			
	TS@IBSTAX.COM address: (to be us	sed for future annual report	notification)
For further information concernir	ig this matter, pleas	se call;	
CESAR RAMIREZ		at (<u>407</u>	863-3866
Name of Contact I	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made	payable to the Florida Dep:	artment of State:
_	.75 Filing Fec & tificate of Status	(Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Co P.O. Box 6327 Tallahassee, FL	ction porations	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment

Articles of Incorporation of

FILED

LAKE NONA FARM F	OOD CORP. 2021 HAR 26 PH 4: 09
(Name of Corporation as currently	filed with the Florida Dept. of State)
P20000045	STORELLAY OF STATE
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	13024 NARCOOSSEE ROAD
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	ORLANDO, FL 32832
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	13024 NARCOOSSEE ROAD
	ORLANDO, FL 32832
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	•
(Florida stre	et address)
New Registered Office Address:	, Florida
•	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
N/A	
Signature of New Re	rgistered Agent, if changing
Check if applicable	

☐ 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)

Example:

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.

A Change	<u> </u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith	N/A	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				·
Remove				
5)Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach addition	r adding additional / nal sheets, if necessar). (Be specific)			
/A					
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lf an amendme	ent provides for an e	xchange, reclassifica	tion, or cancellation	n of issued shares,	
provisions for	r implementing the a	mendment if not cor	tained in the amen	dment itself:	
(if not ap _f	olicable, indicate N/A	ı			
N/A					
-	.				
					
					
					
	·				

he date of each amendment(s) ad	option:06/17/2020	, if other than the
ate this document was signed.		
ffective date <u>if applicable</u> :	06/17/2020	
	tno more than 90 days after amendment fil	le date)
ote: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requi- partment of State's records.	rements, this date will not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
OxThe amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors without	shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes east for ficient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The fact woting group entitled to vote separately on the amount	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	.,	
o,	(voting group)	
Dated 3/19	13021	
	ector, president or other officer - if directors or officer	have not been
	by an incorporator – if in the hands of a receiver, trust d fiduciary by that fiduciary)	ee, or other court
	CESAR RAMIREZ	
-	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	