P20000094488

(Req	uestor's Name)	<u> </u>
` '	,	
(Add	ress)	
(Add	1622)	
(Add	ress)	
(City	/State/Zip/Phon	ie #)
PICK-UP	MAIT	MAIL
(Rue	iness Entity Na	me)
(Dus	iness Lituty Na	me)
(Doc	ument Number) ,
Certified Copies	Certificate	s of Status
Canada I antonotia de 15	70 04 0	
Special Instructions to F	ning Officer:	
	<u></u>	





900356519509

12/33/30--01033--001 ++35.00

Amund

FEB 0 6 2021 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: TIFFIN BOX DBM	LINC	
DOCUMENT NUMBI	ER: P20000094488		
	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
ŀ	PETER CAMACHO		
-		Name of Contact Person	
Į.	PETER CAMACHO CPA PA	ı.	
_		Firm/ Company	
3	01 E YAMATO RD SUITE	1140	
_		Address	
l:	BOCA RATON, FL 33431		
_		City/ State and Zip Code	
1	NFO@PETERCAMACHOP	A.COM	
_	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
PETER CAMACHO		at (<u>561</u>	237-5520
Name of	Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	ortment of State:
■ \$35 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)
Amer Divis P.O. I	ng Address Idment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation \mathbf{of}

-2

to

TIFFIN BOX DBM INC

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)	
P20000094488		<u></u>
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:		ng amendment(
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.	A professional corporation name must conta	_The new fon "Corp" in the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2491 OKEECHOBEE BLVD	
	SUITE H	
	WEST PALM BEACH, FL 33409	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the eess:	
Name of New Registered Agent		_
	street address)	_
New Registered Office Address:	(City) . Florida (Zip	Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		
Signature of New	w Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (1)	(I) (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	<u>PT</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change		_	
Add			
Remove			

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Re specific)
, weeking meeting, y	(v = vp = vp vy
f an amendment provides for an evol-	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	-
· · · · · · · · · · · · · · · · · · ·	-

	DECEMBER 18, 2020	
The date of each amendment(s) adoption date this document was signed.	tion:	, if other than the
Effective date if applicable:		
- 	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing require tment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for th ient for approval.	e amendment(s)
	red by the shareholders through voting groups. The fol th voting group entitled to vote separately on the amen	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DECEMBER Dated Signature	Letwamark CDA	
selected, b	tor, president or other officer – if directors or officers by y an incorporator – if in the hands of a receiver, trustee fiduciary by that fiduciary)	
PE	TER CAMACHO	
	(Typed or printed name of person signing)	
CP	A / INCORPORATOR	

(Title of person signing)