P21000010465

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TRUFFLY M	ADE INC				
DOCUMENT NUMB	BER:P2100001046	5	·· ·			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	itter to the following	ng:			
		Sonia Bo	ecerra			
	· · · · · · · · · · · · · · · · · · ·	Name of Conta	act Person		-	
		Swyft F	ilings			
•		Firm/ Com	pany		•	
		3 Greenwa	y Plaza /	#1320		
		Addres	SS		-	
		Houston, T	TX 77046	•		
•	City/ State and Zip Code				-	
	vincen	t@trufflyma	ade.co	om		
	E-mail address: (to be us	-				
			-		. C.	262
For further information	n concerning this matter, plea	se call:			38	ن بے
So	onia Becerra		877	777-0450		2023 JUN -6
	of Contact Person	at (Area Cod	_) le & Daytime Telephone Numbe		
				•	Fig.	ı -
Enclosed is a check for	r the following amount made	payable to the Flor	rida Depa	rtment of State:	E FE	PH ti
X \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Cop (Additional co enclosed)	y	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		-
Ame Divi: P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314		Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

TRUFFLY MADE INC

(Name of Co	rporation as currently	filed with the Florida Dept. of State)	1	
	P210000	10465		
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Fl	orida Profit Corporation adopts the fo	ollowing amendment(s)) to
A. If amending name, enter the new name of	of the corporation:			
			The new	
name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or th	" "Inc," or "Co". A	mpany," or "incorporated" or the abb professional corporation name must	reviation "Corp.," contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		510 SE 25th Avenue		
		Fort Lauderdale, FL 33301		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		510 SE 25th Aver	nue	
		Fort Lauderdale, FL	33301 25 8	
D. If amending the registered agent and/or new registered agent and/or the new reg		ss in Florida, enter the name of the	JUN -6	•
Name of New Registered Agent	Yann Dumo	nceau		
	510 SE 25	th Avenue	mo f	
	(Florida stree	address)	——7. ATI	
New Registered Office Address:	Fort Lauderdale , Florida 33		33301 '''	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of	<mark>ing Registered Agent:</mark> agent. I am familiar wi	th and accept the obligations of the po	sition.	
	_/			
v	AM	-		
^	Signature of New Reg	istered 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.

X Change	PI John	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	Р	VINCENT GUERET	510 SE 25th Avenue
Add			Fort Lauderdale, FL 33301
X Remove			510 SE 25th Avenue
2) Change	P ——	Yann Dumonceau	Fort Lauderdale, FL 33301
_ X _ Add			
X Remove 3) Change	SEC	VINCENT GUERET	510 SE 25th Avenue
Add			Fort Lauderdale, FL 33301
Remove			510 SE 25th Avenue
4) Change	SEC	Yann Dumonceau	Fort Lauderdale FL 33301
Add			
Remove			5 5 5 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5) Change			
Add			FL : 17
Remove			
6) Change			
Add			
Demove			

Attach additional sheets, if necessary). (Be specific)		
		
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,		
provisions for implementing the amendment if not contained in the amendment itself:	SECKLI TALLA	•
(if not applicable, indicate N/A)	PECKETA	=
		=
	-b FR F ITATE	`
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	71 m - 4	-
	CF STAT	-
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	-	

The date of each amendment(s) adoption:	05/30/2023	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	07/01/2023	
	more than 90 days after amendment file date	e)
Note: If the date inserted in this block does not m document's effective date on the Department of Stat		nts, this date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
The amendment(s) was/were adopted by the incoaction was not required.	rporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were adopted by the shar by the shareholders was/were sufficient for appr		nendment(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grow	· ·	~
"The number of votes cast for the amendment	ent(s) was/were sufficient for approval	
by Vincent Gueret	,,,	
(voting §	угоир)	
Dated05/30/2023		
Signature		
` • • · · · · · · · · · · · · · · · · ·	t or other officer – if directors or officers have rator – if in the hands of a receiver, trustee, or that fiduciary)	
Vind	cent Gueret	<u>s</u> 2
(Тур	ed or printed name of person signing)	LVTTVAI
Pro	esident	LAF TA
(Title	e of person signing)	5