P210000 13540

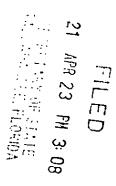
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: LEESEBURG DON	NUTS INC				
DOCUMENT NUMBE	R:					
	*Amendment and fee are sub	omitted for filing.				
Please return all correspo	ondence concerning this mat	ter to the following:				
P	AUL PAQUETTE					
		Name of Contact Person				
L	LEESEBURG DONUTS INC					
_	Firm/ Company					
4.	25 PINE BLUFF TRAIL					
_		Address				
C	ORMOND BEACH, FL 32174					
_		City/ State and Zip Code	2			
N	MANIAR@HOTMAIL.CO	м				
-		ed for future annual report	notification)			
	concerning this matter, pleas		170 2307			
PAUL PAQUETTE		at (
Name of	Contact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State;			
S35 Filing Fee	X \$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 of

LEESEBURG DONUTS INC

(Name of Corporation as current	ly filed with the Florida Dept. of State)	
P21000013540		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation: LEESBURG DONUTS INC		
		The new
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."	A professional corporation name must contain	
B. Enter new principal office address, if applicable:	SAME AS BEFORE	
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
		·
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the 5:	
Name of New Registered Agent		
(Florida st	reet address)	
New Registered Office Address:	Florida 🔼	
	(City) (Zip C	ode)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	with and accept the obligations of the position 3.00	
Signature of New R	legistered 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)

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> 14</u>	John Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		Name		<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 ad	ing or adding additional Art ditional sheets, if necessary).	(Be specific)	 			
						
<u> </u>						
		· <u>-</u>				
	-	 -	_			
			_		-	<u>.</u>
				_		<u></u>
			•			
	<u> </u>			<u> </u>		
. <u>If an ame</u>	endment provides for an exc	hange, reclassificat	tion, or cancellation	on of issued shar	<u>es,</u>	
<u>provisio</u> (if w	ns for implementing the am of applicable, indicate N/A)	endment if not con	tained in the ame	<u>ndment itself:</u>		
(ij ne	ог аррисавле, такан тогу					
		<u></u>			·	
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			<u>-</u>			
		-			<u> </u>	

The date of each amendment	c(s) adoption:	, if other than the
date this document was signed	04/16/02021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s ere sufficient for approval.)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following stateme ed for each voting group entitled to vote separately on the amendment(s):	nt
"The number of vote	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	4.19.2021	
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other courppointed fiduciary by that fiduciary)	<u></u>
	Typed or printed name of person signing)	
	(Title of person signing)	<u> </u>
	(Tate of person nighting)	