P21000063686

(Requestor's Name)	_	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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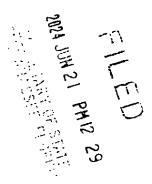
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NIC Amend

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

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NAME OF CORPORATION: Dipped n Smashed Inc
DOCUMENT NUMBER: P210000 63686
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chantel Alonso Name of Contact Person
Dipped n Smashed Inc
1238 SU 131 PI Cil W
Miami, Florida, 33184 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chuntel Alonso at (786) 3992176 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

•	•	or CN
	Articles of Amendment	Florida Dept of States 1
	to Articles of Incorporation	·- / 1- ·-
	of	. PM12 29
Diag 1 11	الماممية	and IUN 21
Dipped N	poration as currently filed with the	North Day (State)
(Name of Cor	poration as currently filed with the	Florida Dept. of States
((Document Number of Corporation (if	known)
ursuant to the provisions of section 607.1006, s Articles of Incorporation:	Florida Statutes, this Florida Profit Co	orporation adopts the following amendment(s)
. If amending name, enter the new name of	f the corporation:	
Piet	ty Baked Inc	The new
PIE + ame must be distinguishable and contain the wa Inc.," or Co.," or the designation "Corp." chartered." "professional association," or the	"Inc," or "Co". A professional co	ocorporated" or the abbreviation "Corp.," orporation name must contain the word
. Enter new principal office address, if app Principal office address MUST BE A STREE		
Enter new mailing address, if applicable	<u> </u>	
(Mailing address <u>MAY BE A POST OFF</u> I	CE BOX)	
	· · · · · · · · · · · · · · · · · · ·	
. If amending the registered agent and/or r new registered agent and/or the new regis		enter the name of the
Name of New Registered Agent		
	(Florida street address)	
	, , , , , , , , , , , , , , , , , , , ,	
New Registered Office Address:	(C)	, Florida
	(City)	(Zip Code)
	na Darintan di Amanta	
ew Registered Agent's Signature, if changing the hereby accept the appointment as registered a		he obligations of the position.
		S
	Signature of New Registered Agent	if changing
	Signature of New Registered 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change		_	
Add			
Remove			
2) Change		_	<u></u>
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
<i>δ</i>) Change		_	
Add			
Remove			
Remove			

	y). (Be specific)
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	·
f an amendment provides for an e	exchange, reclassification, or cancellation of issued shares.
provisions for implementing the a	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:
f an amendment provides for an e provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
provisions for implementing the a	mendment if not contained in the amendment itself:
provisions for implementing the a	mendment if not contained in the amendment itself:
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ocument's effective date on the De	(no more than 90 days after amendment file date) ock does not meet the applicable statutory filing requirements, this date will not be listed as to partment of State's records.
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as t
ocument's effective date on the De	
dention of Amandment(s)	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	sted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
selected	ector, president or other officer—if directors or officers have not been by an incorporator—if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
аррони	
-	(Typed or printed name of person signing)
	Owner Pres (Title of person signing)