P2100009094L

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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NIC amend

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A. RAMSEY NOV 0 5 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WHY NOT COFF	E IMPORTERS CORP	
DOCUMENT NUMBI	ER: P21000090946		···
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	ILIAN	TA DELGADO CHEGWIN	
_		Name of Contact Person	1
	WHY N	OT COFFEE IMPORTER	S CORP
_		Firm/ Company	
	17983	SSW-11TH STREET	
_		Address	
	РЕМВ	ROKE PINES, FLORIDA	33029
_		City/ State and Zip Cod	e
	NINI	DELGADOCH@GMAIL.	COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information ILIANA DELGA	concerning this matter, pleas DO CHEGWIN	786	458-6681
Name of	Contact Person	at (at Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio The C 2415 i	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
2021 OCT 26 AMII: 06

WHY NOT COFFE. IMPORTERS CORP.

(Name of Corporation as currently filed with the Florida Dept! of State)

P21000090946

A. If amending name, enter the new name of the	corporation:	
WHY NOT COFFEE IMPORTS		The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abl	ic," or "Co". A professional cor	orporated" or the abbreviation "Corp.," rporation name must contain the word
B. Enter new principal office address, if applical (Principal office address <u>MUST BE A STREET A.</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE I</u>	<u>BOX</u>)	
D. If amending the registered agent and/or registered agent and/or the new registered Name of New Registered Agent	stered office address in Florida, er ed office address:	nter the name of the
	(Florida street address)	
New Registered Office Address:	, 	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	Registered Agent: t. I am familiar with and accept th	e obligations of the position.

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 = ChiefExecutive 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>	<u>John Do</u>	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jos	nes .	
X Add	<u>sv</u>	Sally Sn	<u>sith</u>	
Type of Action (Check One)	Title		<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				
б) Change		_	- 11	
Add				
Remove				

	or adding addition on all sheets, if necessity if necessity if the control of the	essary) — (Be s	pecific)				
TICLE I: TI	HE NAME OF TI	IE CORPORA?	TION IS:				
''	VHY NOT COFFI	EE IMPORTER	S CORP				
							
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	<u> </u>						·
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				· · · · · · · · · · · · · · · · · · ·	··· <u>·</u>		-
an amendn	ment provides for	an exchange,	reclassificatio	n, or cancellati	on of issued sha	ares.	
if not af	or implementing pplicable, indicate	v.M4)	it it nöt coma	<u>nea m ane ame</u>	mainent fisch.		
						_ .	
							

10/22/2021	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
10/22/2021	
Effective date if applicable:	
(no more than 90 days afte	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of d action was not required.	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through votin must be separately provided for each voting group entitled to vote separately.	ig groups. The following statement rately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficie	nt for approval
The number of votes cast for the amendment(s) was/were surficie	iit tot approvar
100%	**
by(voting group)	·
(vining s, vinp)	
DatedSignature	W was how and have
(By a director, president or other officer - if dir	
selected, by an incorporator – if in the hands of	a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
ILIANA DELGADO	CHEGWIN
(Typed or printed name of p	erson signing)
PRESIDENT	
(Title of person signing)	