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Division of Corporations

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From:

Account Name

: AVA FINANCIAL CONSULTANTS INC

Account Number : I20170000094

Phone

: (954)842-1979

Fax Number

: (954)905-4315

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: TRS, SALES 21@GMAIL, COM

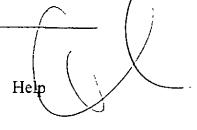
COR AMND/RESTATE/CORRECT OR O/D RESIGN

EAT & FEED INC

Certificate of Status	0
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Page Count	06
Estimated Charge	\$35.00

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Corporate Filing Menu



COVER LETTER

H220003689033

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Division of Corporations NAME OF CORPORATION: EAT & FEED INC P22000004597 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BRIAN D. EATON Name of Contact Person EAT & FEED INC Firm/ Company 1904 S. PATRICK DR Address INDIAN HARBOR BEACH, FL 32937 City/ State and Zip Code JRS.SALES21@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 889-4373 Area Code & Daytime Telephone Number BRIAN D. EATON Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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. Monroo Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	(Nam	e of Corporation as curre	ntly filed with the F	orida Dept. of State)	• ;
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following aments Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The company, or incorporated or the abbreviation "Corporation," or "Co", A professional corporation name must contain the vichartered," "professional association," or the abbreviation "PA." B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or registered office address: N/A Name of New Registered Agent N/A (City) Florida (City) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent:)0004597					;
S Articles of Incorporation: If amending name, enter the new name of the corporation: NA The ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corline," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the vichartered," "professional association," or the abbreviation "P.A." I. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or registered office address: Name of New Registered Agent N/A (Florida street address) New Registered Office Address: (City) (Cip Code)		(Document Number	er of Corporation (if k	nown)		
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If an amendment provides for an exchange, reclassif	ication, or cancellation of issued shares,
provisions for implementing the amendment if not	contained in the amendment itself:
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	OCTOBER 27, 2	.022	H220003689033		٠
The date of each amendment(s) add date this document was signed.	íption:			if other	r than th
Effective date if applicable:					-616
	(no more tha	n 90 days after amen	dment file date)		
Note: If the date inserted in this blo document's effective date on the Dep			ng requirements, this	late will not be list	ted as th
Adaption of Amendment(s)	(CHECK ONE)				
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	(Title of person	signing).			•