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# FLORIDA FILING & SEARCH SERVICES, INC.

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DATE:

07/15/22

NAME:

MEGA KOSHER DISTRIBUTION INC.

TYPE OF FILING: AMENDMENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION; ABBIE/PAUL HODGE

# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MEGA KOSHER	DISTRIBUTION INC		
	BER: P22000035267			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Tamir David			
		Name of Contact Perso	n	
	MEGA KOSHER DISTRIBUTION INC			
		Firm/ Company		
	1920 E. Hallandale Beach Blvd #613			
		Address		
	Hallandale, FL 33009			
		City/ State and Zip Cod	e	
	megadistinc@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, plea	se call:		
Tamir David		at ( <sup>305</sup>	896-0926 dc & Daytime Telephone Number	
Name (	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address indiment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810	

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

FILED
2022 JUL 15 PM 12: no

MEGA KOSHER DISTRIBUTION INC (Name of Corporation as currently filed with the P22000035267 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

### Check if applicable

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> Johi	<u>n Doe</u>	
X Remove		e Jones	
X Add		y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	MGR	BELSKI, SIMON NISSIM	1920 E HALLANDALE BEACH B
Add			Suite 613
X Remove			HALLANDALE BEACH, FL 3300
2) X Change	Secretar	TAMIR, DAVID	20225 NE 39th CT#111S
Add			Aventura, FL 33180
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

	(Be specific)
<u> </u>	<del></del>
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an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amen	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
an amendment provides for an excharge rovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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rovisions for implementing the amen	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

· .

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements. epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharehol	der action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amer ufficient for approval.	odment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	statement (s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
07/14/2022 Dated	! 	
Signature	Fan	
selecte	irector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or officed fiduciary by that fiduciary)	t been er court
	David Tamir	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORP	ORATION: MEGA KOSHER	DISTRIBUTION INC		
	MBER: P22000035267			
	es of Amendment and fee are s	ubmitted for filing.		
Please return all cor	respondence concerning this m	atter to the following:		
	Tamir David			
		Name of Contact Perso	an	
	MEGA KOSHER DISTRIB		/II	
		Firm/ Company		
	1920 E. Hallandale Beach B			
		Address		
	Address Hallandale, Ft. 33009			
	City/ State and Zip Code			
		Only Blate and Zip Coo	ic	
	megadistinc@gmail.com			
	E-mail address: (to be u	sed for future annual report	t notification)	
For further informati	on concerning this matter, plea	se call:		
Tamir David		at ( 305	896-0926	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Air Div	dling Address endment Section dision of Corporations Box 6327	Amend Divisio	Address Iment Section In of Corporations Control of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303