P23000076411

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DATE: 04/16/2024

NAME: MOLINO FOOD MART INC.

TYPE OF FILING: AMENDMENT

COST:

35.00

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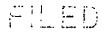
AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MOLINO F	OOD MART INC				
DOCUMENT NUMBER: P23000076411					
The enclosed Articles of Amendment and fee	are submitted for filing.				
Please return all correspondence concerning t	his matter to the following:				
KERRY ANNE SCHU	JLTZ, ESQ.				
	Name of Contact Person				
SCHULTZ LAW GRO	SCHULTZ LAW GROUP, P.L.L.C.				
	Firm/ Company				
2777 GULF BREEZE	PARKWAY				
	Address				
GULF BREEZE, FLOI	GULF BREEZE, FLORIDA 32563				
	City/ State and Zip Code				
KASCHULTZ@SCHL	JLTZLAWGRP.COM				
E-mail address: (to	be used for future annual report notification)				
For further information concerning this matter	, please call:				
KERRY ANNE SCHULTZ, ESQ.	at (850 754-1600				
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount a	made payable to the Florida Department of State:				
S35 Filing Fee S43.75 Filing Fe Certificate of Sta	· · ·				
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



2025 APR 16 AM 11:50 MOLINO FOOD MART INC (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLORIDA P23000076411 (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: 968 JACOBS WAY (Mailing address MAY BE A POST OFFICE BOX) CANTONMENT, FL 32533 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) , Florida New Registered Office Address: __ (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

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	. D	REVOCABLE TRUST dated April 4,2025	968 JACOBS WAY
X Add			CANTONMENT, FL 32533
Remove			
2) X Change	Р	ASIJA, SHIKHA	968 JACOBS WAY
Add			CANTONMENT, FL 32533
Remove 3) Change			
Add			
Remove			
1) Change			
Add			
Remove			
U Change			
Add			
Remove			
) Change			
Add			
Remove			

	(Re specific)
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<u>provisions for implementing the amen</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
an amendment provides for an exchaprovisions 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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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
🕅 The amendment(s) was/were adopted by the incorporators, or board of directors without shaction was not required.	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The folemust be separately provided for each voting group entitled to vote separately on the amen	lowing statement dment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	2025 TAL
by	P -
(voing group)	As T
DatedApril 14, 2025	FILED
Signature Sulcha ASI3A	1: 50
(By a director, president or other officer – if directors or officers h selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	ave not been
SHIKHA ASIJA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	