## P9500000881

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Crunchies & Munc	hies, Inc.	
DOCUMENT NUMB	ER:		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Piease return all corresp	oondence concerning this ma	tter to the following:	
I	Kalci McElroy Blair, Esquire		
-		Name of Contact Person	1
	Wetherington Hamilton, PA		
-		Firm/ Company	
;	812 W. Dr. MLK, Jr. Blvd., S	Suite 101	
-		Address	
	Tampa, FL 33603		
-		City/ State and Zip Code	
	kmbpleadings@whhlaw.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, please	se call:	
Jessica Zehr		at (	225-1918
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
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)
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

Crunchies & Munchies, Inc.	F.C	Glad with the Florida Da	nt of State)
·	or Corporation as current	y filed with the Florida De	pr. or state)
95000000881	Decument Number of	f Corporation (if known)	
	•	•	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following amendment(
. If amending name, enter the new n	ame of the corporation:		
	3 J. 1	" au l'impare augres	The new
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	Corp," "Inc," or "Co"	A professional corporation	name must contain the word
B. Enter new principal office address.	if applicable:	3315 SE 17th Street	
Principal office address MUST BE A STREET ADDRESS		Ocala, FL 34471	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable <u>:</u> OFFICE BOX		· · · · · · · · · · · · · · · · · · ·
			<u> </u>
If amending the registered agent an new registered agent and/or the new registered agent	nd/or registered office add w registered office address	ress in Florida, enter the n	ame of the
Name of New Registered Agent	Wetherington Hamilton, I		
The of the state o	812 W. Dr. MLK, Jr. Blvd	., Suite 101	
	(Florida st	eet address)	
New Registered Office Address:	Tampa		33603 , Florida
New Registered Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Agent	: with and accept the obligation	ons of the position
neredy accept the appointment as regar	1	and addapt the conguit	····
L	1,12		
	$\times$		<del></del>
$\mathcal N$	) Signature of New R	egistered Agent, if changing	:
Check if applicable			
☐ The amendment(s) is/are being filed p	ursuant 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 = 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
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			
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5) Change			
Add			
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6) Change			
Add			
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The date of each amendment(s) adoption:, if other th	an 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 requirements, this date will not be listed document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
2/14/2024	
David.	
Signature Patricia Janey  Signature E088F89048B5447.	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Morris Janey :	
(Typed or printed name of person signing)	.•
President	
(Title of person signing)	