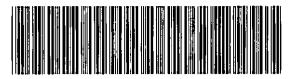
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(Re	equestor's Name)	
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	t. (Ct-t-7) - (Dt	-40
(Cı	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: culinary systems in	nc		_		
	IBER: p97000069035			_		
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	antony lagana					
		Name of Contact Persor	1			
	culinary systems inc					
		Firm/ Company	· 			
	9351 sir lawrence ct					
		Address				
	windermere, fl 34786					
	City/ State and Zip Code					
	tlagana@culinarysystems.com	n		110 210 30	2023 APR -5	
	E-mail address: (to be used for future annual report notification)				AP	3
	· ·	·			70	H Catherine H
For further informati	on concerning this matter, pleas	se call:			5 PH	
Antony Lagana		at (6166563	13.77		
Name	e of Contact Person	Area Co	de & Daytime Telephone N	umber	0	
Enclosed is a check (for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	S43.75 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)			
Ar Di	ailing Address nendment Section vision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



March 23, 2023

ANTONY LAGANA CULINARY SYSTEMS INC. 9351 SIR LAWRENCE CT WINDERMERE, FL 34786

SUBJECT: CULINARY SYSTEMS INC.

Ref. Number: P97000069035

We have received your document for CULINARY SYSTEMS INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 223A00006765



Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)	
P97000069035	 		
(Document Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	nis <i>Florida Profit Corporati</i>	on adopts the following	g amendment(s
A. If amending name, enter the new name of the corporation:			
na			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.,	A professional corporati		n "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	na		
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 registered agent and/or the new regist		TALLALASSE STATES on the ename of the	2023 APR -5 PM 1: 10
(Florida	street address)		
New Registered Office Address:		Florida	
	(City)	(Zip C	oae)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		ations of the position.	

Signature of New Registered Agent, if changing

Check if applicable

 $[\]Box$ 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)

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.

Evample: 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
1) na Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

r., 1	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
na	Actach additional success, y necessary, (be specific)
F.	If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
efe	etrive imdeiately a share exchange form Antony lagana and Archarceporn lagan will go to anan Lagana and Analise laga
Ar	an lagana will recieve 75000 additional shares for a total of 150,000 shares or 15% ownership of company
Αr	alise Lagana will recieve 75000 additional shares for a total of 15,000 shares or 15% wonderhip of company
	tony Lagana ,will give 75000 shares to anan lagana
Αi	nony Eugenia (Will Erre 75000 Otteres to and ragaria

Jam The date of each amendment(s) adoption:	uary 1 2022	, if other than the
fate this document was signed.		
january 1 2022 Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not locument's effective date on the Department of S	t meet the applicable statutory filing requirements, this State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHE	ECK ONE)	
☐ The amendment(s) was/were adopted by the ir action was not required.	ncorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes east for the amendm pproval.	ent(s)
	shareholders through voting groups. The following stategroup entitled to vote separately on the amendment(s):	tement
"The number of votes east for the amend	dment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(votin	ng group)	
Dated $12-20$	9-2028	
	Junt or other officer – if directors or officers have not be porator – if in the hands of a receiver, trustee, or other of the contract of the	
\	ANTONI (COCIVO	
	President	
(Т	Title of person signing)	