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## COVER LETTER

TO: Amendment Section

Division of Corpo	rations			
NAME OF CORPOR.	D 00 000	teriors, Inc	<u>, ,                                    </u>	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all correst	nondence concerning this ma	tter to the following:		
		1 - To a 1	Δ	
_		Ana 100Th		
	(	Name of Contact Person Name of Contact Person	S.Inc.	
	550 Ocean	Firm/ Company  N. #UH		
_	Then Bisco	whe, PC 3	3149	
-		City/ State and Zip Code		
	0	natootle po	gmail.com	
_	E-mail address: (to be us	sed for future annual report	sotification)	
For further information	concerning this matter, pleas	se call:		
A	ne Toothe	at (305	, 110-8405	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)	
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		
i atta	ndaace, Fr. Jajim	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

## Articles of Amendment to Articles of Incorporation

of the same

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('CT Janteriors	Ivc.
(Name of Corporation as currently	filed with the Florida Dept. of State)
7 0000 PP F	1619
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  Fet Cood Food S INC.  name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered." "professional association," or the abbreviation "P.A."	Thenew ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	550 Ocean DV. #6H Key Biscayne, FL33149
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	550 OCEONDY, #4H Viey Biscoyne, FL33149
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
•	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
Check if applicable	

☐ 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)

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 Do	<u>c</u>	
X Remove	V	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>pith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_	<del> </del>	
Add				
Remove				
2) Change		_		
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6) Change		<del>-</del>		
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Remove				

F. If an amendment provides for an evenange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NAs)		I sheets, if necessary).	11 - 17 - 17 - 17 - 1				
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)  1 is 1.							
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 meet the applie document's effective date on the Department of State's records.	able statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or taction was not required.	poard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders thromust be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	re sufficient for approval
by	<u></u>
(voting group)	
	er – if directors or officers have not been
selected, by an incorporator – if in the appointed fiduciary by that fiduciary)	hands of a receiver, trustee, or other court
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