P99000053344

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HEAVENLY SAN	NDWICHES & SMOOTHI	ES, INC.
DOCUMENT NUM	P9900005334.1		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	Attorney Joshua C. Wells		
		Name of Contact Person	1
	Wright & Casey, PA		
		Firm/ Company	
	340 North Causeway		
		Address	
	New Smyrna Beach, FL 321	69	
		City/ State and Zip Cod	e
	cowlesa88@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea		428-3311
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
S35 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations Entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HEAVENLY SANDWICHES & SMOOTHIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P99000053344 (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: n/a (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: COWLES A. STEWART Name of New Registered Agent 115 Flagler Avenue (Florida street address) New Smyrna Beach New Registered Office Address: (City) 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) (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 = ChiefExecutive 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>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	Р	STEPHEN S. WILLIAMS	115 Flagler Avenue	
Add X Remove			New Smyrna Beach, Fl. 32169	
Remove 2) Change	<u>P</u>	COWLES A. STEWART	115 Flagler Avenue	
XAdd			New Smyrna Beach, FL 32169	
Remove 3) Change				
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change			·	
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

(Attach adamamai S	heets, if necessary).	(Be specific)				
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If an amendment p	rovides for an exch	nange, reclassifi	cation, or cancel	<u>lation of issued</u>	shares,	
provisions for imp (if not applicab	le, indicate NA)	nament ii not c	ontained in the a	<u>imendment itse</u>	<u>lf:</u>	
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The date of each amendment date this document was signed	November 2, 2020 (s) adoption:, if other than th
Effective date if applicable:	November 2, 2020
	(no more than 90) days after amendment file date)
Note: If the date inserted in document's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.
☐ The amendment(s) was/wer must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s)
	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Dated Oc	ober 30 2020
o:	·
Signature 🔼	a director, president or other officer - if directors or officers have not been
Set-	ected, by an incorporator – if in the hands of a receiver, trustee, or other court
app	ointed fiduciary by that fiduciary)
	Stephen S. Williams
	(Typed or printed name of person signing)
	,
	President
	(Title of person signing)