North

State of Rhode Island
Department of State - Business Services Division

## **Articles of Amendment**

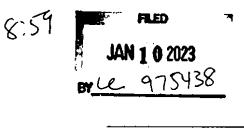
DOMESTIC Business Corporation

→ Filing Fee: \$50.00 (\$210 for an increase in authorized shares)

Pursuant to the provisions of RIGL <u>7-1.2-905</u>, the undersigned corporation adopts the following Articles of Amendment to Its Articles of Incorporation:

1. Entity ID Number:	2. The name of the corporation is:	
000017243	Westcott Baking Co., Inc.	
by the board of directors of adopted the following amen	corporation (or, where no shares have been issu the corporation) in the manner prescribed by Ri dment(s) to the Articles of Incorporation on:	ued IGL <u>7-1.2</u> 01/06/2023
4. If the entity's name is cha state the new name:	nging, Pinga Bakery, Inc.	
· · · · · · · · · · · · · · · · · · ·		Check the box to indicate no change
5. If the total authorized sha Total Authorized Sh (Number of Shares	ares Class of Stock	n: *List ALL, authorized shares as of this amendment. Par Value Per Share
If you desire, you may includ	de a statement of all or any of the designations the qualifications, limitations, or restrictions of the	and the power, preferences, and rights,
RIGL <u>7-1.2</u> .		en when are permited by the provisions of
State any provisions here (o	ptional):	Check the box to indicate an attachment
		Check the box to indicate no change
	is changing complete the following section: C	HECK ONE BOX ONLY
Perpetual (on-going)		
Date certain for dissolut		

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 101 - Revised: 12/2021

R.I. OFPT, OF STATE BUS SYCS DIV

2023 JAN 10 AM 8:59

<ol><li>If the entity's purpose is changing complete the following section transacted in the State of Rhode Island.</li></ol>	• The new purpose should include ALL activity to be
Check the box to indicate an attachment	Check the box to indicate no change 🖌
8. If adding or amending additional provisions, complete the following	· · · · · · · · · · · · · · · ·
Check the box to indicate an attachment	Check the box to indicate no change
9. As required by RIGL 7-1,2-105, the entity has paid all fees and ta	
10. Date when these Articles of Amendment will be effective: CHEC	K ONE BOX ONLY
Date received (Upon filing)	-
Later effective date (Date must be no more than 90 days from	
Under penalty of perjury, I declare and affirm that I have examined t accompanying attachments, and that all statements contained herei	hese Articles of Amendment, including any in are true and correct.
Type or Print Name of Authorized Officer of the Corporation	Date
Michael J. Pinga President	01/09/23
Signature of Authorized Officer of the Corporation	
Michael J. Pinga fresident	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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State of Rhode Island Department of State | Office of the Secretary of State Gregg M. Amore, Secretary of State

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

January 10, 2023 08:59 AM

Treng M. Course

Gregg M. Amore Secretary of State

