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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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CÔVER LETTÈR

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Blue Oven Kitchens Inc			
DOCUMENT NUMBER: N 10000003525			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Val Leitner (Name of Contact Person)			
Blue Oven Kitchens Inc. (Firm/Company)			
4048 NW 30th P) (Address)			
Gainesville, FC 32606-6683			
Vale blue oven kitchen 5. org E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Val Leitner at (352) 278.7518 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
□\$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee & Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee & Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Street Address Amendment Section Division of Corporations Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of Cover Head of Corporation as currently filed with the Florida Dept. of State

N100000003525

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

he new name must be distinguishable and bbreviation "Corp." or "Inc." <u>"Company</u>		
Enter new principal office address, if a Principal office address MUST BE A STR		
. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
If amending the registered agent and/onew registered agent and/or the new registered agent and		Florida, enter the name of the
. If amending the registered agent and/o new registered agent and/or the new r Name of New Registered Agent:		Florida, enter the name of the
new registered agent and/or the new r		
<u>Name of New Registered Agent:</u>	egistered office address:	

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)

Title **Name** <u>Address</u> **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 8/24/267
Effective date if applicable: (date of adoption is required)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 8 3 1 20 1 G Signature
(By the chairman or vice chairman of the board, president or other officer-if directors
have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing)

Page 3 of 3