P09000010821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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APPROVED
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FILED

10 MAR -9 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2010

RAFFAELE PERROTTA
2372 SW PAMONA ST
PT ST LUCIE, FL 34953

SUBJECT: PEER.RLL GREEK OVEN PIZZERIA, INC.
Ref. Number: P09000010821

NEW CORPORATION'S NAME:
PEER.RLL BRICK OVEN PIZZERIA, INC.

We have received your document for PEER.RLL GREEK OVEN PIZZERIA, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 710A00004736

FILED
2010 MAR -3 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PEER, RLL GREEK OVEN PIZZERIA, INC

DOCUMENT NUMBER: P09000010821

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raffaele Perrotta
(Name of Contact Person)

(Firm/ Company)

2372 S.W. Pamona St.
(Address)

Port St. Lucie FL. 34953
(City/ State and Zip Code)

raffy2042@Hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raffaele Perrotta at (305) 206-4995
(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 &**
Certificate of Status

☐ **$43.75 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

PEER, RLL GREEK OVEN PIZZERIA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000010821

(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:

A. If amending name, enter the new name of the corporation:

PEER, RLL BRICK OVEN PIZZERIA, INC.

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." **"Company" or "Co." may not be used in the name.***

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Raffaele Perrotta
2372 S.W. Pamona St.
P.S.L. FL. 34953

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:

Name of New Registered Agent:

New Registered Office Address: *(Florida street address)*

(City) , Florida *(Zip Code)*

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

10 MAR -8 AM 10: 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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	Address	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: 3/5/10
(date of adoption is required)

Effective date if applicable: _____
(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 3/5/10

Signature Raffaele Perrotta
(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, or other court appointed fiduciary by that fiduciary)

Raffaele Perrotta
(Typed or printed name of person signing)

President
(Title of person signing)