

CHURCHILL, QUINN, RICHTMAN & HAMILTON, LTD.

A PROFESSIONAL CORPORATION

ATTORNEYS AT LAW

TWO SOUTH WHITNEY

POST OFFICE BOX 284

GRAYSLAKE, ILLINOIS 60030

(847) 223-1500

FAX (847) 223-1700

ROBERT W. CHURCHILL
WILLIAM A. CHURCHILL
JOHN W. QUINN
JOHN (JACK) RICHTMAN
MARK T. HAMILTON
MARK VAN DONSELAAR
LEO J. DELANEY
JOHN L. QUINN

FOUNDED IN 1903
R. W. CHURCHILL (1875-1963)
GEORGE O. CHURCHILL (1914-1985)
JOHN C. BAUMGARTNER (Retired)

February 11, 2014

Florida Department of State
Amendment Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

**RE: PITA GULF COAST, INC.
DOCUMENT NO.P14000008797**

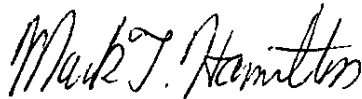
Ladies and Gentlemen:

Enclosed please find an original and copy of the proposed Articles of Amendment to Articles of Incorporation for Pita Gulf Coast, Inc. Please file the original, file stamp the copy and return it to me in the enclosed self-addressed stamped envelope. Our check is enclosed in the amount of \$35.00 for the filing fee.

Please note that the Articles of Amendment is simply being filed to correct the name to provide for the proper Registered Agent.

Should you have any questions regarding the foregoing or should you need any additional information, please do not hesitate to contact me.

Very truly yours,



Mark T. Hamilton
MTH/odl

Enclosure

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PITA GULF COAST, INC.

DOCUMENT NUMBER: P14000008797

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

Please return all correspondence concerning this matter to the following:

LEONARD J. RIZZO

Name of Contact Person

PITA GULF COAST, INC.

Firm/ Company

1100 PINE RIDGE ROAD - UNIT B-101

Address

NAPLES, FL 34108

City/ State and Zip Code

RIZZO.LEN@ATT.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEONARD J. RIZZO at (847) 494-5961
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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

APPROVED
AND
FILED

14 FEB 14 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

PITA GULF COAST, INC.

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

P14000008797

(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:

N/A

The new

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:

N/A

(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:

Name of New Registered Agent LEONARD J. RIZZO

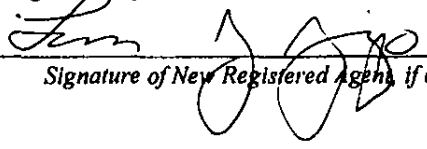
1100 PINE RIDGE ROAD, UNIT B-101, NAPLES, FL 34108

(Florida street address)

New Registered Office Address: N/A, Florida (City) (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

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)

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.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|---|------------|-------|-------------------------|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>N/A</u> | _____ | _____ _____ _____ |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>N/A</u> | _____ | _____ _____ _____ |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>N/A</u> | _____ | _____ _____ _____ |
| 4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>N/A</u> | _____ | _____ _____ _____ |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>N/A</u> | _____ | _____ _____ _____ |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>N/A</u> | _____ | _____ _____ _____ |

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval
by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

APPROVED AND FILED
14 FEB 14 AM 11:12
SECRETARY OF STATE
HALL AND GOSSETT, FLORIDA

Dated 2-2-14

Signature 

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

LEONARD J. RIZZO
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)