D16000010666

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORATION: CATOOCUMENT NUMBER: P1600	ΓERING 001066	BY D&B CORF)
The enclosed Articles of Amendment a			
Please return all correspondence concer	ning this mat	ter to the following:	
OSMEL G	ONZAL	.EZ	
		Name of Contact Persor	1
CATERIN	G BY D	&B CORP	
		Firm/ Company	
1201 NW	3ER AV	/E APT 809	
		Address	
MIAMI, FL	_, 33136	6	
		City/ State and Zip Code	e
OSMELGON	ZALEZ1	989@GMAIL.C	MC
		ed for future annual report	
. For further information concerning this	matter, pleas	e call:	
OSMEL GONZALEZ		at (786	, 229-7950
Name of Contact Persor			de & Daytime Telephone Number
Enclosed is a check for the following ar	mount made j	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee □\$43.75 Fi Certificate	ling Fee & e 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 Corporati P.O. Box 6327 Tallahassee, FL 3231		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

CATERING BY D&B CORP

CATERING BY DAD CORP			
(Name of Corporation as currently filed with the	Florida Dept. of State)		
P16000010666	•		
(Document Number of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
MILLENNIALS KITCHEN CORP	The new		
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	1201 NW 3ER AVE APT 809		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIÁMI, FL, 33136		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1201 NW 3ER AVE APT 809		
(Maning dual too MATE DE ATT OF THE DOA)	MIAMI, FL, 33136		
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	aress in Florida, enter the name of the		
Name of New Registered Agent			
<i></i>			
(Florida s	treet address)		
New Registered Office Address:	, Florida		
(City	y) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>		
l hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.		
Signature of New Registered	Agem-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: <u>X</u> Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add Remove			
Change Add Remove			
Change Add Remove			
4) Change Add Remove			
Change Add Remove			
5) Change Add Remove		·	

ttach additional sheets, if necessary)). (Be specifi	c)			
					
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		• •			
an amendment provides for an ex	xchange, reclas	sification, or o	ancellation of	issued share	<u>s,</u>
provisions for implementing the a	mendment if no	ot contained in	the amendme	ent itself:	
(if not applicable, indicate N/A)	,				
•					
					-
<u> </u>					
					

The date of each amendment(s) adopt	ion: 08/05/2016
Effective date if applicable:	(no more than 90 days after amendment file date)
	, ,
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):
	the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and shareholder
Dated 08/05/20	16 N
Signature 4	
selected, by	for, president or other officer—If directors or officers have not been an incorporator — if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
O	SMEL GONZALEZ
	(Typed or printed name of person signing)
<u>P</u>	RESIDENT
	(Title of person signing)