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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GABBY'S TROPI	CAL GRILL CUISINE, IN	C
DOCUMENT NUMBER: P19000042943		·
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
SUE DUCASSE		
	Name of Contact Person	1
	Firm/ Company	
8289 NW 124TH TERRACI	E	
PARKLAND, FL 33076	Address	
	City/ State and Zip Code	2
AVALANCHEFINL@GMA	AIL.COM	
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	ase call:	
CLIFFORD WALKER	954 at (638-7673 de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 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	Amend Divisio The Co	Address Iment Section In of Corporations Entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GABBY'S TROPICAL GRILL CUISINE, INC

(Name of Corporation	on as currently filed with the F	lorida Dept. of State)
P19000042943		
(Docum	nent Number of Corporation (if l	(nown)
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	a Statutes, this Florida Profit Co	rporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
		The new
ame must be distinguishable and contain the word "cc 'Inc.," or Co.," or the designation "Corp," "Inc,' 'chartered," "professional association," or the abbre	" or "Co". A professional co	corporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD		
<u> </u>		
		• •
Enter new mailing address, if applicable:	(V)	-
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>	**
		
		9:
lf amending the registered agent and/or register		nter the name of the
new registered agent and/or the new registered	omce audress:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
Hew Registered Office Hadress.	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Reg		
hereby accept the appointment as registered agent.	I am familiar with and accept th	e obligations of the position.
Signo	ature of New Registered Agent, i	f changing
-	,	ज कि कि विकास
heck if applicable	/07.0100 /11\ / \ T C	
The amendment(s) is/are being filed pursuant to s. (607.0120 (11) (e), F.S.	

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:

X Change	<u>PT</u>	John Doc	
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>	<u>Addres</u> s
1) Change	CEO	MARVIN EARLE	Unit B
X Add			
Remove			Deerfield Beach, FL 3344
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
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f	and the state of t
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
	

Fb . d . t f	SEPTEMBER 25, 2020	:F = 4h = = 4h = = 4h
The date of each amendment(s) ad late this document was signed.	option:	_, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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	
GABBY'S TROPICAL	GRILL CUISINE SHAREHOLDERS	
	(voting group)	
SEPTBER 2 Dated	25, 2020	
Signature	Lui Virano	
(By a di	rector, president or other officer - if directors or officers have not been	_
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	SUE DUCASSE	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)