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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ANTHONY'S ON	THE BLVD, INC	
DOCUMENT NUM	P13000067931 BER:		
The enclosed Articles	of Amendment and fee are si	ubmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	ANTHONY SERRAGO		
	ANTHONY'S ON THE BLA	Name of Contact Perso /D, INC	n
	1303 DEL PRADO BLVD S	Firm/ Company	
	CAPE CORAL, FL 33990	Address	
		City/ State and Zip Cod	e
tserra	go@yahoo.com		
or further information	n concerning this matter, pleas	516	769-1533
Name o	of Contact Person	Area Co	)de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address ment Section in of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation 17 JUN -8 PM 12: 08

(Name of Corpor	ration as currently	filed with the Florid	la Dept. of State	<u>e</u> )	
P13000067931					
(Doc	cument Number of C	Corporation (if knowr	1)		
ursuant to the provisions of section 607.1006, Flo s Articles of Incorporation:	rida Statutes, this <i>F1</i>	orida Profit Corpora	ation adopts the	following amendm	ent(s)
. If amending name, enter the new name of the	e corporation:				
				The ne	C <sup>7</sup>
ame must be distinguishable and contain the v Corp.," "Inc.," or Co.," or the designation "Co ord "chartered," "professional association," or t	orp," "Inc," or "Ce	o". A professional o		or the abbreviatio	1
s. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u>					
		· · · · · ·			
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u> )	BOX)				
c. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u> )	<u>BOX</u> )				
(Mailing address <u>MAY BE A POST OFFICE a</u>	stered office addres	s in Florida, enter t	he name of the		
(Mailing address MAY BE A POST OFFICE and the second secon	stered office addres	s in Florida, enter t	he name of the		
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(Mailing address MAY BE A POST OFFICE of the control of the registered agent and/or registered agent and/or registered agent and/or the new registered agent a	stered office address: ed office address: (Florida street				

## 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.

X Change	<u>PT</u>	John D	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	S		DENISE WHITAKER	621 NW 15TH TERRACE
X Add				CAPE CORAL, FL 33993
Remove				
2) Change		_		-
Add				
Remove				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
JUNE 1, 2017	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more man 20 days after amenament file date)
<b>Note:</b> If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the 'State's records.
Adoption of Amendment(s) (CI	IECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
☐ The amendment(s) was/were approved by the must be separately provided for each voting	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes east for the ame	ndment(s) was/were sufficient for approval
by	
(vo	ting group)
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated 6-2-1	7
Signature Settle	l Whitahi
(By a director, pre	sident or other officer - if directors or officers have not been
	orporator – if in the hands of a receiver, trustee, or other court
appointed fiduciar	y by that fiduciary)
De	nise Whitaker (Typed or printed name of person signing)
	(Typed or printed name of person signing)
2	sec.
	(Title of person signing)