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COVER LETTER

TO: Amendment Section

Division of Corpor	ations		
NAME OF CORPORA	ATION: Ralac	C PORT	2
DOCUMENT NUMBE	ER: VO	18000001	<u>X44</u>
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
-	Plice 9	Name of Contact Person	n _
_	Alicos A	Firm/ Company	TCX SONICO XXI
_	4820 15 14	WY 980 5	40 to 14
_	Larola	City/ State and Zip Code	289
	E-mail address: (to be us	sed for future annual report	uchas con
For further information	concerning this matter. pleas	se call:	
Name of	Contact Person	at (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	☐\$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)
	ng Address		Address
	dment Section on of Corporations		Iment Section on Organizations
	Box 6327		Building
	assee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Dala	of	$T \cap \Omega$				
		iled with the Florida Dept.	of State)			
(Name of Corp.)		MQLil I	. UI State)			
Y	Occument Number of C	Cornoration (if known)				
		•		_		
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this Fla	<i>orida Profit Corporation</i> ad	opts the foll	owing an	iendm	ent(s)
A. If amending name, enter the new name of t	he corporation:					
				Th	e nev	s'
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "word "chartered," "professional association," of	Corp," "Inc," or "Co	T. A professional corpora				
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>				·		
				<u></u>	19	
				<u> </u>		 F 7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)			7		ا ۱ مست ستام
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				; <u> </u>	3	\Box
				<u> </u>	_ 	
D. If amending the registered agent and/or renew registered agent and/or the new regist		s in Florida, enter the nam	e of the	<u>></u>	_	
new registered agent and/or the new regist	ered office address:					
Name of New Registered Agent						
	(Florida street	and the sums	 -			
	(Fibrial Siree)	unaress)				
New Registered Office Address:	·C	 ity)	Florida	(Zip Code		
		•				
New Registered Agent's Signature, if changing	Registered Agent					
I hereby accept the appointment as registered ag		h and accept the obligations	of the posit	ion.		
	Signature of New Reg	istered Avent 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.

Blike Jones, vas Kemove,	una san	, Smith, 37 ta an atta.	
Example: X Change	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>PIS</u>	hosorias morrello	Mulborry, FL33800
Add 			——————————————————————————————————————
2) Change Add	<u>S</u> _	Gi <u>onpaola Scotto</u> Di Frega	41160 Festival Pointe Blud Mulborry, FL 33860
Remove 3) X Change Add	15	Posariam Saniano	4160 Festival Pointe Blu Millocry, FL 33860
Remove 4) X Change Add	<u>P</u>	<u>Giovannim Schiano</u>	837 LXXXLuard St. Lukeland, FL 33803
Remove Add	T	Salvatorem Sapum	406 Chrey Pl Lakeland, FL 33803
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
All Titles that are currently on Palace
= Pizza Inc. actions are incorrect. The
Correct Officers and Titles are as follows:
(C) 10+ (-1-1101) (I) (I) (I) (I) (I) (I) (I) (I) (I) (I
Don don V. E. Clarena Argura Ci
Prosident: Schuro Gioucini M 837 Lixadiocid St Lukolard, IL 33803
85' Lixxxilixird St Lithelling, LL 3003
· (ViceRoscont): Schicop, Koscia M.
4140 Festival Pointe Blyd Mulberry FL 33860
- Schrano, Salvatore M. Jr (Treusuren)
406 arrey Place Lakeland FL 33803
· Secretural Scotto Di Freca Gianzana
4160 TESTIVALI POINCE BRUG Mulberry, FL 3386
_ STOCK FEDINGS TO THE COUNTY TO SECOND
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
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)
(Typed or printed name of person signing)
(Title of person signing)