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JUN 1 9 2024 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ______

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

George Kirshy

Name of Contact Person

Luigis Pizza of Brooksville Inc.

Firm/ Company

19571 LILY POND CT

Address

Brooksville/ Florida 34609

City/ State and Zip Code

Georgemkirshy@gmail.com

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

For further information concerning this matter, please call:

P.O. Box 6327

George Kirshy		at (³⁵²	5447731			
Name o	f Contact Person	Area Code & Daytime Telephone Number			C- 3	
Enclosed is a check for	the following amount made	payable to the Florida Dep		024 HA		
🛢 \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	· · · · ·	17 - 7 Pii 4:	,
Ame	ing Address ndment Section tion of Corporations	Ameno	Address Iment Section on of Corporations	1.	0	

The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

Luigis Pizza of Brooksville Inc

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

627265

(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:

Luigis Pizza Inc				a . t
name must be distinguishable and contai. "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp," "Inc," or "Co"	". A professional corp	rporated" or the abbreviation oration name must contain	_The new n "Corp.," n the word
B. Enter new principal office address,	if applicable:	n/a		
(Principal office address <u>MUST BE A S</u>	n/a			
		п/а		
C. <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>	n/a			
		n/a		
		n/a		· ~ >
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office a w registered office add	address in Florida, ente ress:	er the name of the	1. 1. 1. 1.
Name of New Registered Agent	n/a			ا ا
	n/a			
	(Florid	la street address)	······	2 <u></u>
New Registered Office Address:	n/a		, Florida	
		(City)	(Zip Ce	xde)

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

Check if applicable

□ 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

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<u>PT</u> John Doe

X Remove	<u>v</u>	Mike Jones
X Add	<u>sv</u>	Sally Smith

<u>X</u> Add	<u>SV</u> <u>Sally S</u>	mith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
I) $\frac{n/a}{2}$ Change	n/a	n/a	n/a
n/aAdd			л/а
n/a Remove			n/a
2) <u>n/a</u> Change	n/a	n/a	n/a
n/aAdd			n/a
n/a Remove	n/a	n/a	n/a
3) <u>n/a</u> Change			n/a
n/aAdd			n/a
n/a Remove			n/a
4) <u>n/a</u> Change	n/a	n/a	n/a
n/a Add			n/a
n/a Remove			n/a
5) <u>n/a</u> Change	n/a	n/a	n/a
n/a Add			n/a
n/a Remove			п/а
б) <u>n/a</u> Change	n/a	n/u	n/a
n/a Add			n/a
n/a Remove			n/a

E.	<u>if :</u>	ameno	ling	ora	adding	additiona	Articles,	enter	change(s)	here:
										_

(Attach additional sheets, if necessary). (Be specific)

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n∕a ____ _ . . . ____ ____ ____ ----____ ----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) n/a _ _ _ _ _ _____

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5/1/2024
The date of each amendment(s) adoption:, if other that
date this document was signed.
6/1/2024 Effective date <u>if applicable:</u>
(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 a document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
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 east for the amendment(s) was/were sufficient for approval
by"
(voting group)
Dated <u>5 - 1 - 2024</u> Signature (By a director, president or other officer - ikdirectors 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)
George M Kirshy
(Typed or printed name of person signing)
Title of person signing)
(Title of person signing)

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