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(Re	equestor's Name)
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PICK-UP	☐ WAIT · ☐ MAIL
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Certified Copies	Certificates of Status
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COVER LETTER

Division of Corporations

NAME OF CORPORATION: Tallahassee Kithen Center, Inc

DOCUMENT NUMBER: FO2271

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

Please return all correspondence concerning this matter to the following:

Susan Grabowski

Name of Contact Person

Tallahassee Kitchen Conter. Inc

Firm/ Company

634 E Park Are

Address

Tallahassee Tal

Susan & Kitchen center. com

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

For further information concerning this matter, please call:

TO: Amendment Section

Ssan Grabowski at 850 561-1127

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee
Certificate of Status
Certified Copy
(Additional copy is enclosed)

\$35 Filing Fee & Certified Copy
(Additional Copy is enclosed)

\$35 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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Tallahassee Kitchen Center, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

P 0 22	, ,		gin u
(Document Number of	Corporation (if k	known)	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Fl</i>	orida Profit Corporation a	dopts the following amendn
A. If amending name, enter the new name of the co	orporation:		
			The ne
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	," "Inc," or "Co	o". A professional corpor	
B. Enter new principal office address, if applicable	»:		
(Principal office address MUST BE A STREET ADI			
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)X</u>)		.
D. If any district the second second second second			
D. If amending the registered agent and/or register new registered agent and/or the new registered		s in Florida, enter the har	ne of the
Name of New Registered Agent			
Admit of the Megistered Agent	- <u>-</u>		
	(Florida street	t address)	
New Registered Office Address:		, Florida	
Now Register of Office Made ess.	(City)	, 1 1011da	(Zip Code)
N. P. L. J. J. G.			
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		h and accept the obligation	s of the position
and the second s	. a ya	ii ana accept the obligation	s of the position.
(1)			•

Signature of New Registered Agent, 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: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VD	Paul Grabowski, St	4444 Widgeon Way Tallahessae FL 327303
Add Remove			Jallanessa TC 32505
2) Change	工	Paul Grabowski, Jr	881 E Call St Tallahassee FL 3230
Remove 3) Change Add	<u>s</u>	Katie Grabowski	538 Tallahassee FL 32303
Remove 4) Change			
Remove			
5) Change Add Remove	****		
6) Change			
Remove			

	(Be specific)
·	
f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption: _date this document was signed.	Wlarch 1, 2015	, if other than the
Effective date if applicable:	march 1, 2015	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) r approval.	
	the shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):	
"The number of votes cast for the am	endment(s) was/were sufficient for approval	
by	oting group)	
action was not required.	e board of directors without shareholder action and shareholder e incorporators without shareholder action and shareholder	
Dated April	1,3015	
(By a director, pre	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court	
	ry by that fiduciary)	
	(Typed or printed name of person signing) vesident	
<u>+</u>	(Title of person signing)	