## JT9067

•.	
, (Re	equestor's Name)
(Ad	ddress)
(Ad	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	Wait Mail
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



300136722553

10/10/08--01027--017 \*\*35.00

OBOCT 10 PH 2: 07
SECRETARY OF STATE
ALLAHASSEE. FLORIDI

Americo C.COULLIETTE OCT 162008

**EXAMINER** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Or land	o Hosher Cat	ering.Inc
DOCUMENT NUMBER: 5 190	67	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
chanlotte Gre	enseib Contact Person)	· 
Orlando Kosher (Firm/	Catering In	<u>C.</u>
10100 W. SAMPle	e Rd ste 37	27
Coral Springs (City/ State	FL 33065 and Zip Code)	<del></del>
For further information concerning this matter, ple	ease call:	
Charlotte GreenSeib (Name of Contact Person)		
Enclosed is a check for the following amount mad	e payable to the Florida Departi	ment of State:
\$35 Filing Fee \$\text{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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of

	`
orlando hosher cater	ing Inc
(Name of Corporation as currently filed with the	
5,0067	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, following amendment(s) to its Articles of Incorporation:	, this Florida Profit Corporation adopts the
A. If amending name, enter the new name of the corporation:	
The new name must be distinguishable and contain the wincorporated" or the abbreviation "Corp.," "Inc.," or Co.," "Co". A professional corporation name must contain the association," or the abbreviation "P.A."	or the designation "Corp," "Inc," or
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	OBOCT 10 P
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent:	)A 7
New Registered Office Address: (Florida	street address)
	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am fan position.	niliar with and accept the obligations of the
Signature of New Re	egistered 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)

<u>Title</u>	Name	Address	Type of Action
P	charlotte Greenseib	coral spings FL 33076	Add Remove
P	Jonathan Greenseid		
VP	Charlotte Greenseib	9835 NW 48th CT Caral Springs FL 33076	Add Remove
	ending or adding additional Articles, enter a additional sheets, if necessary). (Be specij		
prov	amendment provides for an exchange, recisions for implementing the amendment if if not applicable, indicate N/A)		
	Pag	ge 2 of 3	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) a	adoption:
Effective date if applicable:	/ • /
	more than 90 days after amendment file date)
:	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were act by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	oproved by the shareholders through voting groups. The following statement reach 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	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(vot	ting group)
The amendment(s) was/were adaction was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adaction was not required.	dopted by the incorporators without shareholder action and shareholder
. Dated	10/7/08
Signature	Frankle Greenseid
	rector, president of other officer – if directors or officers have not been
appointe	, by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Charlotte Greensein
·	(Typed or printed name of person signing)
	President
	(Title of person signing)