## N10000001017

(Re	equestor's Name)	
(Ad	ldress)	· · · ·
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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2017 APR 24 PN 12: 55
SECRETARY OF STATE
BALLAHASSEE, FLORIDA

Amend Name ch8

APR 24 2017

I ALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	Taste of Gainesville, (	nc.		
NAME OF CO				
DOCUMENT?	N/MBER:			
The enclosed A	tiples of Amendment and fee are subm	itted for filing.		
Please return all	correspondence concerning this matter	to the following:		
Scott Costello				
<del></del>	. (	Name of Contact Pe	erson)	
C of Career			,	
Taste of Greate	Tamesonie		<del>,</del>	V
		(Firm/ Company	/)	
4915 NW 43rd	Sireet			
		(Address)		
Gainesville, FL	32606			
	. ((	City/ State and Zip (	Code)	
scott@advantag	publishinginc.com			
	E-mail address: (to be used f	or future annual rep	ort notification	)
For further infor	hation concerning this matter, please or	all;		
Scott Costello		at	352	372-5854
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a ch	ck for the following amount made pays	able to the Florida D	Department of S	State:
\$335	Filing Fee U\$43.75 Filing Fee & C Certificate of Status	343.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi s Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
2.5	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	An Div Cli 266	reet Address nendment Section vision of Corpo fron Building 51 Executive Co clahassee, FL 32	rations enter Circle



April 11, 2017

SCOTT COSTELLO TASTE OF GAINESVILLE INC. 4915 NW 43RD STREET GAINESVILLE, FL 32606

SUBJECT: TASTE OF GAINESVILLE, INC.

Ref. Number: N10000001017

We have received your document for TASTE OF GAINESVILLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 017A00006968

## Articles of Amendment to Articles of Incorporation of

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tate)	``^{\ 	- 555 - 565 - 565 - 565

Taste of Gainesv	lle, Inc.		80 m O.
	(Name of Corporation as curren	tly filed with the Florida Dept. of State)	38 2 3 NOR
N10000001017			
	(Document Numb	er of Corporation (if known)	
	ovisions of section 617.1006; Florida Statute is Articles of Incorporation:	es, this Florida Not For Profit Corporation ad	opts the following
A. If amending	jame, enter the new name of the corporati	on:	
Taste of Greater	Bainesville, Inc.		The new
name must be dis "Company" or "	inguishable and contain the word "corporat <u>Co." may not be used in the name</u>	tion" or "incorporated" or the abbreviation "	
	incipal office <u>address, if applicable:</u> address <u>MUST BE A STREET ADDRESS</u> )	N/A	
	ailing address, if applicable: ress <u>MAY BE A POST OFFICE BOX</u> )	N/A	
D. <u>If amending</u> new register	he registered agent and/or registered offic d agent and/or the new registered office a	e address in Florida, enter the name of the	
	Name of New Registered Agent: N/A		
	New Registered Office Address:	(Florida street address)	
		(City) , Florida (Zip Co	
		(City) (Zip Co	ode)
New Registered A hereby accept the	Agent's Signature, if changing Registered .  e appointment as registered agent. I am fan	Ayent: niliar with and accept the obligations of the po	osition.
	Sig	gnature 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, i) necessary)

Please note the officer/director little 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 X Remove X Add	V Mik	n <u>Doe</u> le <u>Jones</u> y <u>Smith</u>	•
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) X Change	C	Scott Costello	Advantage Publishing, Inc.
Add	<del></del>		4915 NW 43rd Street
Reniove			Gainesville, FL 32606
2) Change	CEO	Erica Brown	Taste of Greater Gainesville
X Add			4915 NW 43rd Street
Remov			Gainesville, FL 32606
3)Change	D	Sherry Houston	Ronald McDonald House
X Add	<del>-</del> -	•	5011 NW 51st Place
Remov			Gainesville, FL 32606
4) Change	D	Jennifer Costello	Wells Fargo
X Add	<u></u>		5512 NW 51st Avenue
Remov	<b>x</b>		Gainesville, FL 32653
5) Change	$\overline{\mathcal{D}}$	Sheila Spence	John Spence, LLC
X Add	<del></del>		P.O. Box 357606
Remove			Gainesville, FL 32635
6) Change	D	Keith Watson	Keith Watson Productions
X Add			224 NE 10th Avenue
Remove			Gainesville, FL 32601
		Page 2 of 4	

E. <u>If amend</u> (a <i>ttach ad</i>	ling of adding	z additional Art s. if necessary).	icles, enter cha (Be specific)	nge(s) here:				
N/A	ļ							
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Page 3 of 4

The date of each amenda	January 1, 2017	, if other than the
date this document was sig	ned.	
Effective date if applicab	January 1, 2017	
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will not on the Department of State's records.	be listed as the
Adoption of Amendment	(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were sufficient for	as/were adopted by the members and the number of votes cast for the amendment(s) or approval.	
There are no member adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
Dated A	pril 5, 2017	
Signature	16 tello	_
(By	the chairman br vice chairman of the board, president or other officer-if directors venot been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)	
j	Scott Costello	
	(Typed or printed name of person signing)	
	Chair of the Board	
	(Title of person signing)	