# N17000004560

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#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

## HOUSE OF RUTH RESTORATION, INC. NAME OF CORPORATION: \_\_\_\_ N17000004560 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DIANA DAVIS (Name of Contact Person) HOUSE OF RUTH RESTORATION, INC (Firm/ Company) 123 RONA LANE (Address) DAVENPORT, FLORIDA 33897 (City/ State and Zip Code) ZIGDIN38@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 424-1798 863 DIANA DAVIS (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: N ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (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 to Articles of Incorporation of

FILES

IOUSE OF RUTH RESTORATION, INC.

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HOUSE OF ROTH RESTORATI	ON, INC	21	116 11-5	1 (1) 0
(Name of Corporation as currentl	y filed with the Flo	rida Dept. of State		
N17000004560		. 2	un e e e	
(Document Number	of Corporation (if	known)		
Pursuant to the provisions of section 617,1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	, this <i>Florida Not F</i>	or Profit Corporation	on adopts t	he following
A. If amending name, enter the new name of the corporatio	<u>π:</u>			
N/A				The new
name must be distinguishable and contain the word "corporatio "Company" or "Co." may not be used in the name.	on" or "incorporate	ed" or the abbreviat	ion "Corp	" or "Inc."
B. Enter new principal office address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADDRESS)		N/A		
_		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
-		N/A		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	address in Florida	, enter the name of	<u>f the</u>	
Name of New Registered Agent:	N/A			
		N/A		
	(Florida sireei address)			
New Registered Office Address:	X.1.4			
	N/A		orida	N/A
	(City)	12	Zip Code)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	gent: iliar with and accep	nt the obligations of	the position	7.
	MA	7		
Sia	name of New Real	viered doent if chin	ioino	

# 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: XChange X Remove X Add	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ANTHONY DAVIS	123 RONA LANE
Add			DAVENPORT
X Remove			FLORIDA. 33897
2) Change	V	MADELINE DONALDSON	6463 POWERS POINTE CIRCLE
X Add	- <del>-</del>		ORLANDO
Remove			FLORIDA, 32818
3 ) Change	S	MICHELLE HARRIAGE	895 MANSFIELD ROAD
X Add		<del></del>	APT. 11
Remove			TAVARES, FLORIDA 32778
4) Change	T	TANIESHA THOMPSON	407 BEXLEY DRIVE
X Add			DAVENPORT
Remove			FLORIDA 33897
5) Change	D	DELORES STOKES	123 RONA LANE
X Add			DAVENPORT
Remove			FLORIDA, 33897
6) Change			
Add			
Remove			

. If amending or adding additional Artic (attach udditional sheets, if necessary).	(Be specific)			
N/A				
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		JANUARY 26, 2018	
	date of each amer this document was	dment(s) adoption:signed.	if other than the
Effe	ective date if applic	N/A	
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not lete on the Department of State's records.	oe listed as the
Add	option of Amendm	ent(s) ( <u>CHECK ONE</u> )	
	The amendment(s' was/were sufficien	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	JANUARY 26, 2018	
	Signature	Al Quis	<u>-</u> .
		(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
		DIANA DAVIS	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	