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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	ORPORA	TION: PETE & JACK, IN	C.	
DOCUMENT	NUMBEI	R:		
		Amendment and fee are su	bmitted for filing.	
Please return al	l correspo	ndence concerning this ma	tter to the following:	
	RO	DDRIGO POSADA		
			Name of Contact Persor	1
	GI	RUSHOFF & POSADA		
			Firm/ Company	· - · · · · · · · · · · · · · · · · · ·
	69	91 W BROWARD BLVD	STE 105	
			Address	
	PL	ANTATION, FL 33317		
			City/ State and Zip Code	
	pio	etro4444@yahoo.com		
	_	E-mail address: (to be us	sed for future annual report	notification)
		oncerning this matter, pleas		954 1540
Name of Contact Person			at (954	
		ne following amount made		de & Daytime Telephone Number artment of State:
S35 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)
	Amend Divisio P.O. Be	g Address ment Section in of Corporations ox 6327 issee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations In the interior of Tallahassee In Monroe Street, Suite 810 Insect, FL 32303

Articles of Amendment to Articles of Incorporation of

PETE & JACK, INC		
(Name of Corporation a	as currently filed with the Flo	rida Dept. of State)
P00000071113		
(Document	Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	atutes, this Florida Profit Corpo	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat	r "Co". A professional corp	porated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>	
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		>
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		·
		<u> </u>
		S,
D. If a more the maintained around and (an assistant and	office address in Florida anto	ar the name of the
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office.		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		obligations of the position.
The second secon		6
Signature	e of New Registered Agent, if c	hanging

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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One) 1) X Change	P	PETER LICATA	3417 SW DAVIE BLVD
Add			FT LAUDERDALE, FL 33312
Remove			
2) Change	D	JACK LICATA	3417 SW DAVIE BLVD
Add			FT LAUDERDALE, FL 33312
X Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sh	eets, if necessary).	(Be specific)			
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F. If an amendment p	rovides for an excha	nge, reclassifica	tion, or cancellation	on of issued shares	1
if not applicate	lementing the amend ble, indicate N/A)	iment it not con	taineu in <u>Ine</u> ame	nament itsen:	
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	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend fficient for approval.	ment(s)
	roved by the shareholders through voting groups. The following steach 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)	
AUGUST 1	1, 2023	
Dated		
5 '		
selecte	rector, president or other officer – if directors or officers have not l, by an incorporator – if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
	PETER LICATA	
	(Typed or printed name of person signing)	·
	PRESIDENT	
	(Title of person signing)	