P01000063597

| (Re | questor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nai | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate: | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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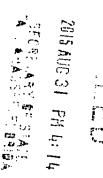




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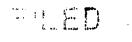


COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: Clintmoore Restau | rant, Inc. | | |
|---------------------------|---|--|---|--|
| DOCUMENT NUMBI | ER: P01000063597 | | | |
| The enclosed Articles o | f Amendment and fee are su | bmitted for filing. | | |
| Please return all corresp | ondence concerning this ma | tter to the following: | | |
| S | haron Gorant | | | |
| _ | Name of Contact Person | | | |
| R | Rotelli Pizza Pasta, Inc. | | | |
| _ | · | Firm/ Company | | |
| 4 | 4755 Technology Way, Suite 101 | | | |
| Address | | | | |
| E | Soca Raton, FL 33431 | | | |
| _ | City/ State and Zip Code | | | |
| FirstJet | 1@aol.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | concerning this matter, pleas | se call: | | |
| Sharon Gorant | | at (⁵⁶¹ | 826-0900 | |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | ertment of State: | |
| \$35 Filing Fee | □\$43.75 Filing Fee & 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) | |
| Amen Divisi P O. I | ng Address dment Section on of Corporations Box 6327 nassee, FL 32314 | Amend Divisio Clifton 2661 E | Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of



2015 AUG 31 PM 4: 14

| Clintmoore Restaurant, Inc. | SECAL MARY OF STAIL |
|--|---|
| (Name of Corporation as curre | ntly filed with the Florida Dept. of State) |
| P01000063597 | |
| (Document Number | er of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation: | his Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corpord "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," o word "chartered," "professional association," or the abbreviation | ntion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable: | |
| (Principal office uddress <u>MUST BE A STREET ADDRESS</u>) | |
| | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr | |
| Name of New Registered Agent | |
| | |
| (Florida | street address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia | ent: ar with and accept the obligations of the position |
| V | accept the conganions of the position. |
| | |
| | |
| Signature of Ne | w 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 | <u>PT</u> | John Doe | |
|----------------------------|--------------|-------------------|--------------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | Pres | Joseph Bilotti | 4755 Technology Way, Suite 101 |
| Add | | | Boca Raton, FL 33431 |
| X Remove | | | |
| 2) Change | Pres | Stephanic Vincent | 4755 Technology Way, Suite 101 |
| x Add | | | Boca Raton, FL 33431 |
| Remove | | | |
| 3) Change | VP | Joseph Bilotti | 4755 Technology Way, Suite 101 |
| X Add | | | Boca Raton, FL 33431 |
| Remove | | | |
| 4) Change | Treas | Joseph Bilotti | 4755 Technolgoy Way, Suite 101 |
| x Add | | | Boca Raton, FL 33431 |
| Remove | | | |
| 5) Change | Sec | Joseph Bilotti | 4755 Technology Way, Suite 101 |
| x Add | | | Boca Raton, FL 33431 |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Auu | | | |

| Aπach <i>additional</i> | dding additional Art sheets, if necessary). | (Be specific) | | | |
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| provisions for in | t provides for an exc mplementing the am cable, indicate N/A) | hange, reclassifi endment if not co | cation, or cancellate ontained in the ame | ion of issued shar endment itself: | cs. |
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| The date of each amendment date this document was signed | | , if other than the |
|--|--|--------------------------------|
| Effective date <u>if applicable</u> : | August 19, 2015 | |
| Enecuve date <u>it applicable</u> . | (no more than 90 days after amendment file date) | |
| | this block does not meet the applicable statutory filing requirements, this che Department of State's records. | date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/weby the shareholders was/weby | re adopted by the shareholders. The number of votes cast for the amendmen ere sufficient for approval. | t(s) |
| | re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s): | nent |
| | s cast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| | re adopted by the board of directors without shareholder action and sharehol | der |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder | |
| Augu Dated | st 19, 2015 | |
| Signature _ | Il Biletti | |
| (E Se | Ay a director, president or other officer – if directors or officers have not bee elected, by an incorporator – if in the hands of a receiver, trustee, or other coppointed fiduciary by that fiduciary) | |
| | Joseph Bilotti | |
| | (Typed or printed name of person signing) | |
| | Vice President | |
| | (Title of person signing) | |