

PO10000 72917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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12/26/12--01031--004 **35.00

*Amend
SS
12/28/12*

FILED
12 DEC 26 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Law Office of
Steven Michael LaBret, P. A.

226 Hillcrest Street
Orlando, Florida 32801-1243

LL.M. IN TAXATION
ALSO ADMITTED IN LOUISIANA
AND MICHIGAN BARS

PHONE # (407) 422-5819
FAX # (407) 423-7718
E-MAIL: Labretpa@cfl.rr.com

December 20, 2012

Amendment Section
Div. of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: **Licensee:** Clayton Hospitality Group, Inc. d/b/a
Diamond Club
Business: Adult Entertainment
Liquor License: 58-00202 Series 4COP
Location: 527 N. Semoran Blvd.
Orlando, FL 32807
County: Orange
Landlord: Capital U4, Ltd.

Our Client: Clayton Hospitality Group, Inc. d/b/a
Diamond Club
Our File No: 115-U-0018 (Uranick)

Dear Sir/Madam:

Enclosed find the following:

1. Filing Fee of \$35.00
2. Amendment to Articles of Incorporation

Please record the document and send proof of recording to the undersigned.

Thank you for your anticipated cooperation.

Sincerely yours,



Steven M. LaBret

SML/aeo
Encls.

Articles of Amendment
to
Articles of Incorporation
of

CLAYTON HOSPITALITY GROUP, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P01000072917

(Document Number of Corporation (if known))

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ *The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

527 N. SEMORAN BLVD.
ORLANDO, FL 32807

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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, 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P, S, T</u>	<u>CAROL A. URANICK</u>	<u>1365 WINDSONG ROAD</u> <u>ORLANDO, FL 32809</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>RHONDA R. URANICK</u>	<u>1365 WINDSONG ROAD</u> <u>ORLANDO, FL 32809</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

The date of each amendment(s) adoption: DECEMBER 4, 2012

Effective date if applicable: DECEMBER 4, 2012
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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 _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated DECEMBER 4, 2012

Signature X *Carol A. Uranick, PRES.*
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

CAROL A. URANICK
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)