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(Requestor's Name) (Address) (Address)	500275607595
(City/State/Zip/Phone #)	08/03/1501016019 **35.00
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: AUNT MARY'S BAGEL INC

P01000103498 DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PEDRO ACOSTA

Name of Contact Person

AUN'T MARY'S BAGEL INC

Firm/ Company

12189 PEMBROKE ROAD STORE #312

Address

PEMBROKE PINES FL 33025

City/ State and Zip Code

Foture 1953@ live.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO ACOSTA

Name of Contact Person

at (_____ 238-2499 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

1 \$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)

Mailing Address

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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 Amendmen	•
• • •	to Articles of Incorporatio	n FILED
UNT MARY'S BAGEL INC	of	2015 AUG - 3 PN 1: 33
	ornaration as surrantly filed wit	h the Flouid Star (IN Flouid STATE
01000103498	orporation as currently med wit	h the Florida Dept. of State) STATE
	(Document Number of Corporati	
s Articles of Incorporation:		rofit Corporation adopts the following amendment
. If amending name, enter the new name	of the corporation:	
	n "Corp." "Inc." or "Co". A p ," or the abbreviation "P.A."	pany." or "incorporated" or the abbreviation rofessional corporation name must contain the
Principal office address <u>MUST BE A STRE</u>	EET ADDRESS)	•
2. <u>Enter new mailing address, if applicab</u> (Mailing address <u>MAY BE A POST OFF</u>		
). If amending the registered agent and/or new registered agent and/or the new re		rida, enter the name of the
new registered agent and/or the new re		
new registered agent and/or the new re	gistered office address:	
new registered agent and/or the new re	gistered office address:	
new registered agent and/or the new re	gistered office address:	· · · · · · · · · · · · · · · · · · ·

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:

(Anach 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:

<u>X</u> Change	<u>ol T9</u>	<u>hn Doe</u>	
X Remove	<u>V</u> <u>M</u>	like Jones	
<u>X</u> Add	<u>SV Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
L) X Change	SEC	PATRICIA ATACA	12189 PEMBROKE ROAD
Add			STORE #312
Remove	·		PEMBROKE PINES FL 33025
2) Change	()	PEDRO ACOSTA	12189 PEMBROKE ROAD
XAdd		·	STORE #312
Remove		•	PEMBROKE PINES FL 33025
3) Change	_ 		
Add			
Remove			
4) Change		`	
Add			
Remove			
5) Change			·······
Add			
Remove			
6) Change		· ·	
Add			

____ Remove

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets. if necessary). (Be specific)

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. . F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

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	7/1/2015.	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
7/1	/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were as by the shareholders was/were :	lopted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	t for the amendment(s) was/were sufficient for approval	
by	۰۹ ۲۰	
	(voting group)	
The amendment(s) was/were as action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder	
7/1/2015		
Dated		
Signature		
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	•
	PEDRO ACOSTA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u></u>