P01000112553

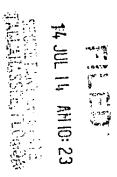
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JUL 2.5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Ki		Antonio, Ir	nc.	
DOCUMENT NUMBER: P010	00112553			
The enclosed Articles of Amendment	and fee are submitted	for filing.		
Please return all correspondence conce	rning this matter to th	e following:		
Jennifer	Barbosa			
	Nam	e of Contact Person		
Kitchens	s by Antoni	o, Inc.		
		Firm/ Company		
800 Hist	toric Goldsl	boro Blvd.		
		Address		
Sanford	, FL 32771			
		State and Zip Code	<u> </u>	
aiarcharha	ടാതിച്ചെ വ	~		
ajarsbarbos	ress: (to be used for fi		natification)	
E-man aud	ress. (to be used for it	uture annuar report	nouncation)	
For further information concerning this	matter, please call:			
Jennifer Barbosa		at (407	, 468-8152	
Name of Contact Person	n		le & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee □\$43.75 F Certificat	te of Status Cer (Ad	.75 Filing Fee & tified Copy ditional copy is losed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			-	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle				
Tallahassee, FL 32314 Zoot Executive Center Circle Tallahassee, FL 32301				

Kitchens	bν	Antonio,	Inc
	~ ,	,	

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

P01000112553

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

'Corp.," "Inc.," or Co.," or the desig	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the all "Co". A professional corporation name must be
vord "chartered," "professional associ		800 Historic Goldsboro Blvd.
. <u>Enter new principal office address</u> Principal office address <u>MUST BE A.</u>		Sanford, FL 32771
Enter new mailing address, if applicable:		800 Historic Goldsboro Blvd
	OFFICE POV	
(Mailing address <u>MAY BE A POST</u>		Sanford, FL 32771
(Mailing address MAY BE A POST If amending the registered agent a new registered agent and/or the new registered agent ag	nd/or registered office ad ew registered office addre	dress in Florida, enter the name of the
(Mailing address MAY BE A POST . If amending the registered agent a	nd/or registered office ad ew registered office addre	dress in Florida, enter the name of the ss:
(Mailing address MAY BE A POST 1. If amending the registered agent a new registered agent and/or the new registered agent and registered agent agen	nd/or registered office adex registered office addre Jennifer Barbos 800 Historic Gol	dress in Florida, enter the name of the ss:

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 (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Aaron Barbosa	520 Applewood Ave.
Add			Altamonte Springs, FL 3270
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary,	rticles, enter change(s) here:
•). (Be specific)
NIA	
7 (7)	
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118.	, · · · · · · · · · · · · · · · · · · ·
If an amendment provides for an ex	change, reclassification, or cancellation of issued shares,
provisions for implementing the an	nendment if not contained in the amendment itself:
If an amendment provides for an exprovisions for implementing the an (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
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provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:

The date of each amendment(s) a	doption: 07/03/14	, if other than the
date this document was signed.		·
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_07/03/14	4	
Signature	A Bal	_
(By a d	irector, president or other officer of directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	
	Jennifer Barbosa	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	