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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ATLANTIC BEA	CH DINER INC.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	BARRY ADEEB		
		Name of Contact Perso	n
	ATLANTIC BEACH DINEI	RINC	
		Firm/ Company	
	501 ATLANTIC BLVD		
	····	Address	
	ATLANTIC BEACH FL 32:	233	
		City/ State and Zip Cod	c
badee	b@beachdiner.com		
		sed for future annual report	notification)
For further information	a concerning this matter, pleas	se call:	
BARRY ADEEB		904	616-5500
Name o	of Contact Person	Area Co) 616-5500 de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□S43.75 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ATLANTIC BEACH DINER INC			
(Name of Corporation as	s currently filed with the	Florida Dept. of State)
P03000093066			
(Document :	Number of Corporation (i	`known)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tates, this Florida Profit (Corporation adopts the f	following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:		
ATLANTIC DINER INC.			Tr.I
name must be distinguishable and contain the word "e-"Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbra	ne," or "Co". A profes.	or "incorporated" or sincorporation name	The new r the abbreviation e must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			THE PRISE PLONE
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		enter the name of the	
Name of New Registered Agent			
	Florida street address)		****
New Registered Office Address:	(City)	, Florida_	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	ed Agent: Jamiliar with and accept .	the obligations of the po	sition.

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: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	g additional Article ts, if necessary).— (.	Be specific)			
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f an amendment prov	vides for an exchan-	ge, reclassification	a, or cancellation o	if issued shares	
provisions for implen	nenting the amendr	ment if not contain	ned in the amendm	ent itself:	
(if not applicable,	indicate N/A)				
			_		
					· · · · · · · · · · · · · · · · · · ·
					
			<u>-</u>		

02/05/2018 The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.
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.
02/05/2018 Dated
Signature
(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)
BARRY ADEEB
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)