P03000135376

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Maria's Greek Res	taurant Inc.	
DOCUMENT NUM	век:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Angela Albanis		
	Maria's Greek Restaurant Inc	Name of Contact Person	1
	2359 Coral Way	Firm/ Company	
	Miami, FL 33145	Address	
		City/ State and Zip Code	2
	mariasgreek@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Angela Albanis		305 at (856.0938)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
An Div P.C	illing Address mendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Maria's Greek Restaurant Inc.

(Name of Corporation a	s currently filed with the Florida Dept. of State)
P03000135376		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the fo	ollowing amendment(s)
A. If amending name, enter the new name of the corpo N/A	oration:	The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc." or "chartered," "professional association," or the abbreviat	· "Co". A professional corporation name must	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>		
C. Enter new mailing address, if applicable:	N/A	2021 J
(Mailing address MAY BE A POST OFFICE BOX)		29
D. If amending the registered agent and/or registered new registered agent and/or the new registered office.		PH 2: 14
NIA <u>Name of New Registered Agent</u>		
N/A New Registered Office Address:	(Florida street address) . Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		sition.
Signatur	e of New Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.	.0120 (11) (e). F.S.	

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: <u>X</u> Change	<u>PT</u> John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Officer	Nikolaos Theodorou	2359 Coral Way
Add X Remove			Miami F1, 33145
2) Change			
Add Remove 3) Change			
Add Remove 4) Change Add			
Remove 5)ChangeAdd			
Remove 6)ChangeAdd			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
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<u>f an amendme</u>	nt provides for an e	<u>vehange, reclassifica</u>	<u>ition, or cancellat</u> i	<u>ion of issued shares,</u>	.
provisions for	implementing the a	mendment if not co	ntained in the amo	endment itself:	
	licable, indicate N/A)				
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				 -	
					•
					41

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late this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
Angela Albanis	or the amendment(s) was/were sufficient for approval
py	(voting group)
06/23/21	
Dated	
Signature	augeli allewin
selected. appointe	ector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) Angela Albanis
· -	
	(Typed or printed name of person signing) President

(Title of person signing)