

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300304810373

10/23/17--01021--010 **35.00

OCT 24 2017
S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ATHE	ENS CAF	E& GRILL, INC		
DOCUMENT NUMB	er: <u> </u>	0072783			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
		S HAJDI Name of Contact Person			
-	ATHENS CAFES GRILL				
Firm/Company P·O·Bo× 1113					
-		Address City/ State and Zip Cod	33037		
<u> </u>		va Whotmae ed for future annual report			
For further information	concerning this matter, pleas	e call:			
TOMAS	HAJDIK	a. 305	de & Daytime Telephone Number		
Name o	f Contact Person	Area Ce	de & Daytime Telephone Number		
Enclosed is a check for	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)	LJ\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Cliffon Building 2661 Executive Center Circle Fallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

	L, INCO				
(Name of Corporation as currently f	led with the Florida Dept	t, of State)			
P 04000072783					
(Document Number of Co	erporation (if known)		-		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	rida Profit Corporation w	dopts the follo	wing amend	lment(s) to
A. If amending name, enter the new name of the corporation:	٨				
			_ _ _		
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co word "chortered," "professional association," or the abbreviation "P.	". A professional corpore	orated" or th ution name m	e abbreviai usi contain	ton the	
B. Enter new principal office address, if applicable:	TOMAS	HAJ:	DIK		
(Principal office address MUST BE A STREET ADDRESS)	13 PIRATES Dr.				
				·	7
	KEYLARG	C_1 \vdash L	<u> 330</u>	5 1	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				_	
	NI	Ť.			
) ed *** **	,	,	
				_	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the nar	ne of the	SEC	*	
new registered agent and/or the new registered office address:	in Florida, enter the nar	ne of the	SECRE	30 (4	-73
		ne of the	SECRETAI TALLAHAS	i g7 0CT 2	可
new registered agent and/or the new registered office address: Name of New Registered Agent	UIA	ne of the	SECRETAIN (TALLAHASSEE	ig 0CT 23	TI IT
new registered agent and/or the new registered office address:	UIA address)	ne of the	SECRETARY OF S	¥7 0CT 23 PH	FILED
new registered agent and/or the new registered office address: Name of New Registered Agent tFlorida street New Registered Office Address:	UIA address) UIA	. Florida	SECRETARY OF SIN		FILED
new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street)	UIA address) UIA		SECRETARY OF SHALL TALLAHASSEE, FLORIDA		FILE O
new registered agent and/or the new registered office address: Name of New Registered Agent tFlorida street New Registered Office Address:	UIA address) UIA		SECREIVER SESIMEL		FILED
new registered agent and/or the new registered office address: Name of New Registered Agent tFlorida street New Registered Office Address:	UIA address) UIA (v)	, Florida(SECRETARY OF SHAFT		FILMO
New Registered Agent's Signature, if changing Registered Agent: New Registered Agent	UIA address) UIA (v)	, Florida(SECRETARY OF SHOTL TALLAHASSEE, FLORIDA on.		平 三 田 〇

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 1/TD.

Changes should be noted in the following manner. Currently John Doc 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 Doc, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	ŗr J <u>oh</u> n L)oc	
X Remove	<u>V</u> <u>Mike</u> .	Jones .	
<u>X</u> Add	SV Sally S	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change	<u> </u>	MONIKA COOPER	184 INDIAN MOUND TRU
Add Remove			TAVERNIER, FL 33070
2) Change			
Add Remove			·
3) Change Add			
Remove 4) Change			
Add Remove			
5) Change			-
Add Remove			
6) Change			
Add Remove			
1101110			

	sheets if necessary)	The shering r			
			ıl		
	· • • • • • • • • • • • • • • • • • • •	N(/	4		
	 -				-
 		<u></u>		1772	
					
- •				 -	
		· 			
					
					-
provisions for im	plementing the amen	ange, reclassification, o idment if not contained	<u>r cancellation o</u> I in the amendm	<u>f issued shares,</u> <u>ent itself:</u>	
(if not applice	able, indicate N/A)				
-	<u>-</u> · –				
		NIA			
		- · · · · ·			· · · · · ·
- -		-			
- - -		·			
		-			
				<u>-</u> .	

The date of each amendment(s) adoption: _	10/13	2017	, it other than the
date this document was signed Effective date <u>if applicable</u> :	10 13	2017	le date)
Note: If the date inserted in this block does document's effective date on the Department o		ole statutory filing requi	rements, this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The napproval	umber of votes cast for t	the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes east for the ame	ndment(s) was/were	sufficient for approval	
by	หลักจ ครอกภา	<u> </u>	
☐ The amendment(s) was/were adopted by the action was not required	e board of directors w	ithout shareholder action	n and shareholder
The amendment(s) was/were adopted by the action was not required	: incorporators withou	at shareholder action and	f shareholder
Dated 101131 Signature 10100	2017		
(By a director, pre selected, by an inc		- if directors of officer nands of a receiver, trust	
	TOF	IAS HAS	DIK
	(Typed or printed na	me of nerson signing)	-
	PRES	IDENT	-
	(Title of	nerson signing)	