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C LEWIS

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person MANKIN FOODS Firm/ Company 8667 S. LAKE CIR. Far MyELS FC 33
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TIMOTHY MANKIN at (239) 565 0205

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

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

□\$43.75 Filing Fee &

Certificate of Status

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enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

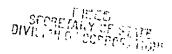
□\$52.50 Filing Fee Certificate of Status

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Articles of Amendment

Articles of Incorporation



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

15 OCT 22 PM 1: 10

PO400147500 (Document Number of Corporation (if known)

ent(s) to

A. If amending name, enter the new name BURGERQUE OF	GAINESVILLE	Inc The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	n "Corp," "Inc." or "Co". A pro	ny," or "incorporated" or the abbreviation Jessional corporation name must contain the
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u>)		
D. If amending the registered agent and/o new registered agent and/or the new re		da, enter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zıp Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		ept the obligations of the position.
	Signature of New Registered As	ont 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	PT	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
A dd				P-LOT
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
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an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
<u>provisions for implementing the ame</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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<u>provisions for implementing the ame</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adopti-	on:	, if other than the
date this document was signed.	9/15/15	DIVSES RETAILS SE
Effective date <u>if applicable</u> :		THE RESIDENCE OF THE PARTY OF T
	(no more than 90 days after amendment file date)	15 OCT 22 PM 1: 10
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirements, the nent of State's records.	., , , , , , , , , , , , , , , , , , ,
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendrent for approval.	nent(s)
	d by the shareholders through voting groups. The following start voting group entitled to vote separately on the amendment(s)	
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and share	cholder .
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and sharehold	er
Dated9\3	115	
Signature(By a director	or, president or other officer – if directors or officers have not	 heen
	an incorporator – if in the hands of a receiver, trustee, or other	
appointed fi	duciary by that fiduciary)	
	TIMOTHY MANKIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	