

P04000152932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

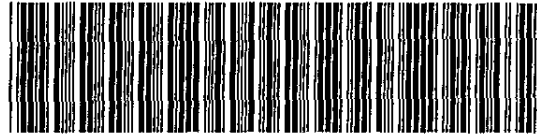
(Business Entity Name)

(Document Number)

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12/27/04--01097--005 \*\*35.00

FILED  
04 DEC 27 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

12/30  
as n/chg d  
Amend

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: PARROT HEADS WING N' THINGS OF SARASOTA

DOCUMENT NUMBER: PO400600152932

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CLARENCE A. BEEMAN

(Name of Contact Person)

(Firm/ Company)

1944 MAIN ST.

(Address)

SARASOTA, FL. 34236

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

CLARENCE (CHIP) BEEMAN

(Name of Contact Person)

at ( 503 ) 720-9919

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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)

Mailing Address

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

Street Address

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

December 21, 2004

Greetings,

I am requesting the change of my corporate name and address.

Also, because time is of the essence on this matter, I have enclosed a pre-paid and pre-addressed envelope for you to return verification and any other documents to me.

Should there be any questions, please contact me at 503-720-9919

Thank you for your help,



Clarence A. Beeman

PARROTHEADS WINGS N' THINGS OF SARASOTA, INC.  
(Name of corporation as currently filed with the Florida Dept. of State)

(Document number of corporation (if known))

PARROTHEADS MAIN BAR INC.

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Florida Profit Corporation

PLEASE ALSO CHANGE ADDRESS  
TO: 1944 MAIN ST  
SARASOTA, FL.  
34236

on "Corp.," "Inc.," or "Co.")  
tion," or the abbreviation "P.A.")

Indicate Article Number(s)

THANK YOU

04 DEC 27 AM 9 00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7-11-64

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 12-21-04

Effective date if applicable: ~~12~~ ASAP  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved 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.

Signed this 21<sup>ST</sup> day of DECEMBER, 2004.

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)

CLARENCE A. BEEMAN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35