## P05000143212

(Re	equestor's Name)	
(Ac	idress)	,··.,
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: Chez	Jaco's Inc.				
DOCUMENT NUMBER: P050001	43212				
The enclosed Articles of Amendment and fee	are submitted for filing.				
Please return all correspondence concerning th	is matter to the following:				
Jacqueline /	Ayyub				
	Name of Contact Person				
40196   15	Firm/ Company				
<u>40186 US H</u>					
Palm Harbo	r, FL 34689				
	City/ State and Zip Code				
E-mail address: (to	be used for future annual report notification)				
For further information concerning this matter,	please call:				
Jacqueline Ayyub_	at (727) 530-4891				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:				
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State					
Mailing Address	Street Address				
Amendment Section	Amendment Section				
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Chez Jaco's Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P05000143212
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent
Name of New Registered Agent
(Florida street address)
New Registered Office Address: Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am fumiliar with and accept the obligations of the position.
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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PT	Jacques Ayyub	40186 US Hwy 19 N
Add			Palm Harbor, FL 34689
Remove			
2) Change	PT	Jacqueline Ayyub	40186 US Hwy 19 N
Add			Palm Harbor, FL 34689
Remove			
3) Change		A STATE OF THE STA	_
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			****
Remove			

<b>f amending or add</b> Attach <i>additional sh</i>	neets, if necessary).	(Be specific)			
			***************************************		
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		·			
<u>provisions for imp</u>	rovides for an excl lementing the ame le, indicate N/A)	nange, reclassifi ndment if not c	cation, or cance ontained in the s	llation of issued sh amendment itself:	ares,
		,		·	<del></del>
, ,					
				<u> </u>	

The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
Enterire date in applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voing group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated9	regree, president or other officer – if directors or officers have not been	
Signature 7/2	equelis Ayyul	
(By a d	region, president or other officer - if directors or officers have not been	
/sélected	i, by an incorporator - if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	TACQUELINE AYYUB (Typed or printed name of person signing)	_
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	