P06000152687

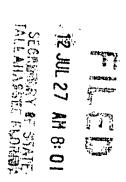
	(Requestor's Name)	
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JUL 3 0 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Mission Lakes Restaurant, Inc. DOCUMENT NUMBER: P06000152687 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Deborah Love** Name of Contact Person Friedman, Rosenwasser & Goldbaum, P.A. Firm/ Company 5355 Town Center Road, Suite 801 Boca Raton, Florida 33486 City/ State and Zip Code dlove@frglaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Deborah Love Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

Mission Lakes Restaurant, Inc

(Name of Corporation as currently filed with the Florida Dept. of State) SEGNESSAY AND STATE. P06000152687

ment(s) to

(Document Number of	rporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the co	oration:
N/A	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	N/A
D. If amending the registered agent and/or register new registered agent and/or the new registered	office address in Florida, enter the name of the ice address:
Name of New Registered Agent N/A	,
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	ered Agent: on familiar with and accept the obligations of the position.
C	Desistance from it changing

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.

X Change	<u>PT</u>	John Do	<u>e</u>				
X Remove	<u>V</u>	Mike Jo	nes				
X Add	<u>sv</u>	Sally Sn	<u>nith</u>				
Type of Action (Check One)	Title		<u>Name</u>			Address	
1) Change							
Add							
Remove							
2) Change		_					····
Add							
Remove							
3) Change		_					
Add							
Remove							_
4) Change							
Add							
Remove							
5) Change		_		· · · · · · · · · · · · · · · · · · ·			
Add							
Remove							
Change							
6) Change					·		
Add							
Remove							

	g or adding additional Articles, enter change(s) here: itional sheets, if necessary). (Be specific)
•	/ shall be replaced in its entirety with the following:
	
Article IV	
The num	nber of shares the corporation is authorized to issue is:
	Shares With A Par Value of \$1.00
,	
<u> </u>	
: Ifan aman	ndment provides for an exchange, reclassification, or cancellation of issued shares,
provision	s for implementing the amendment if not contained in the amendment itself: a applicable, indicate N/A)
N/A	t appicaole, moicule 1471)
	

The date of each amendment(s)	adoption: July 25, 2012
Effective date if applicable:	uly 25, 2012
<u></u> ,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated July 2	25, 2012
Signature	Joann Stelling
	director, president or other officer – if directors or officers have not been ued, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	Joann Stellino
	(Typed or printed name of person signing)
	President
	(Title of person signing)