P07000111736

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ANALYSEF FLORIDA

C. LEINIS ANG -1 2013 EXAININER

COVER LETTER

...

TO: Amendment Section Division of Corporations

	ATION: GRAND DA ER: P0700011173		Q, INC
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
!	LILLIE D. BROW	N	
_		Name of Contact Persor	1
-		Firm/ Company	
4	120 FERN AVEN	UE	
_		Address	
-	TAVARES, FLOF	RIDA 32778	
_		City/ State and Zip Code	3
JVIC	CTORYLADY@A	OL.COM	
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
LILLIE D. BRO	NWC	at (352	_{_)} 455-7772
Name of	Contact Person	Area Co	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)	□\$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 Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FILED
13 JUL 30 PM 3: 49

GRAND DADDY'S BAR-B-Q, INC.

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

P07000111736

SECRETARY OF STATE TALLAHASSEE. FLORIDA

(Document Number of Corporation (if known)

nent(s) to

LIL FATZ B-B-Q, INC.		
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name mus-	
B. Enter new principal office address, if applicable:	420 FERN AVENUE	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	TAVARES, FLORIDA	
	32778	
C. Enter new mailing address, if applicable:	420 FERN AVENUE	
	420 FERN AVENUE	
(Mailing address MAY BE A POST OFFICE BOX)	TAVARES, FLORIDA	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	TAVARES, FLORIDA 32778 dress in Florida, enter the name of the	
O. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	TAVARES, FLORIDA 32778 dress in Florida, enter the name of the	
O. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	TAVARES, FLORIDA 32778 dress in Florida, enter the name of the ess:	

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 Doe			
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	VP	CHARLEY J. TAYLOR	P O BOX 954		
Add			TAVARES, FL		
X Remove			32778		
2) Change	S	CHARLEY J. TAYLOR	P O BOX 954		
Add			TAVARES, FL		
X			32778		
3) Change	VP	DANIEL BROWN	3991 HILLINGDON RD		
X			TAVARES, FL		
Remove			32778		
4) Change	S	DANIEL BROWN	3991 HILLINGDON RD		
X			TAVARES, FL		
Remove			32778		
5) Change					
Add					
Remove					
6) Channe					
6) Change					
Add					
Remove					

E. <u>If amending or adding additional Arti</u>	cles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
NA	
· · · · · · · · · · · · · · · · · · ·	
	The second secon
	,
E. If an amandment arguides for an eval	pange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NA	
 	

The date of each amendment(s) ac	07-24-2013		File it other than th
date this document was signed.	•	12	- ED
Effective date if applicable:		13 J _U	FILED ther than the Land PM 3: 49
	(no more than 90 days	13 JU s after amendment file da &E CRET IALLAHA	ARY OF STATE
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		FLORIDA
☐ The amendment(s) was/were ado by the shareholders was/were su		per of votes east for the amendmen	u(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through veeach voting group entitled to vote se		ment
"The number of votes cast	for the amendment(s) was/were suffi	icient for approval	
by	(voting group)	.,,	
	(voting group)		
The amendment(s) was/were ado action was not required.	pted by the board of directors withou	ut shareholder action and sharehol	der
The amendment(s) was/were add action was not required.	pted by the incorporators without sh	nareholder action and shareholder	
Signature	1-2013 Illie D. Bro	ron	
selected	rector, president or other officer – if t, by an incorporator – if in the hand ed fiduciary by that fiduciary)		
	LILLIE D. BROV	VN	
	(Typed or printed	name of person signing)	
	PRESIDENT/OV	VNER	

(Title of person signing)