

P080000066244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

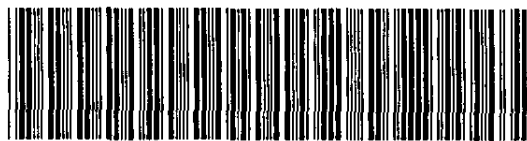
(Document Number)

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09/11/13--01009--020 **52.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 OCT -2 PM 12:29

OCT -3 2013

T. CARTER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
13 OCT -2 PM 12:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

September 19, 2013

FERNANDO G. TODOROV
PRONTO PIZZA CAFE, CORP.
13408 BISCAYNE BLVD
NORTH MIAMI, FL 33181 US

SUBJECT: PRONTO PIZZA CAFE, CORP.
Ref. Number: P08000066244

We have received your document for PRONTO PIZZA CAFE, CORP. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter
Regulatory Specialist

Letter Number: 113A00022029

Sept. 24, 2013

Please be advised that the appropriate box on the amendment form regarding the adoption of the amendment and the appropriate box has been checked. Also the check was not returned and it has been filed and cashed with my banking institution.

*If any additional questions, please advise
Thank you.*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PRONTO PIZZA CAFE CORP.

DOCUMENT NUMBER: P08000066244

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

Please return all correspondence concerning this matter to the following:

FERNANDO G. TODOROV

Name of Contact Person

PRONTO PIZZA CAFE, CORP.

Firm/ Company

13408 BISCAYNE BLVD.

Address

NORTH MIAMI, FL 33181

City/ State and Zip Code

TODOROV.F@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FERNANDO G. TODOROV

Name of Contact Person

at (786)

486-0160

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 OCT -2 PM 12:29

PRONTO PIZZA CAFE, CORP.

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

P08000066244

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

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)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

15051 Royal Oaks Lane

#504

North Miami, FL 33181

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 LUIS A. CISNEROS

15051 ROYAL OAKS LN #504

(Florida street address)

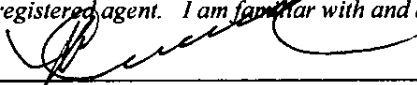
New Registered Office Address: NORTH MIAMI, Florida 33181

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an 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)

N/A

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: **September 4, 2013**
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted 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.

Dated 09/04/2013

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)

FERNANDO G. TODOROV

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)