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(Re	equestor's Name)	- W
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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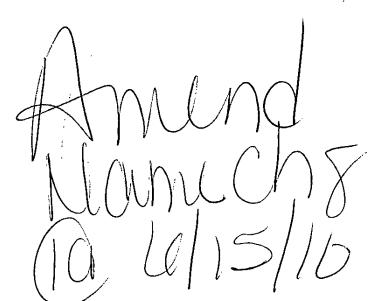
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SECRETARY OF STAILS TALLAHASSEE, FLORIDA



COVER LETTER

TO: Amendment SectionDivision of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	RATION:	LENNY & GERARD, IN	IC.
DOCUMENT NUME	BER:	P08000104475	
The enclosed Articles	of Amendment and fee a	are submitted for filing.	
Please return all corres	spondence concerning th	is matter to the following:	
		hell L. Peristein, Esq. Name of Contact Person	1 - 1 - 2 Mars -
_	Mitc	hell L. Peristein, P.A. Firm/ Company	
	4400 N	. Federal Hwy Suite 210 Address	
_		Oca Raton FL 33431 City/ State and Zip Code	
	mperl E-mail address: (to be use	stein@perIste.in d for future annual report notification)	
For further information	n concerning this matter,	please call:	
	ell L. Perlstein Contact Person	at (<u>561</u>) <u>3</u> Area Code & Daytime Te	
Enclosed is a check fo	r the following amount n	nade payable to the Florida Depar	tment 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 Addre Amendment Se Division of Co	ection	Street Address Amendment Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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

LENNY & GERA	RD, INC.
(Name of Corporation as currently filed	with the Florida Dept. of State)
P08000104	475 J
(Document Number of Co	rporation (if known)
Pursuant to the provisions of section 607.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:
ROSSI OF TOWN C	ENTER. INC. The new
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional and an area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the contain the word "chartered," "professional and area of the chartered	ENTER, INC. "corporation," "company," or "incorporated" or the on "Corp," "Inc," or "Co". A professional corporation association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:	1015 ADAMS ST
(Principal office address MUST BE A STREET ADDRE	(SSS) HOLLYWOOD FL 33019
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the name of the ce address:
Name of New Registered Agent: Mitchell	L. Peristein
	Federal Hwy Suite 210 (Florida street address)
Boca Ra	ton , Florida 33431 (City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	
Signature o	f New Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	LENNY SILVESTRI	190 W. PALMETTO PARK RD Ste Boca Raton FL 33431	☐ Add ☐ Remove
<u>PD</u>	GERARD ROSSI		☑ Add □ Remove
			☐ Add ☐ Remove
	ending or adding additional Articles h additional sheets, if necessary). (B		
prov	isions for implementing the amendm	ge, reclassification, or cancellation of issument if not contained in the amendment its	
	if not applicable, indicate N/A)		
	`		
м-же			
			

The date of each amendment	t(s) adoption: JUNE 2, 2010
Effective date if applicable:	(date of adoption is required)
enective date <u>it applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ad 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated JUNI	<u>E 2, 2010</u>
Signature	Deen'
(By	a director, president of other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	GERARD ROSSI
	(Typed or printed name of person signing)
	PRESIDENT, DIRECTOR, SHAREHOLDER (Title of person signing)