PO8000105085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

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Office Use Only

D. CONNELL   MAR 29 2010

10 MAR 26 AM 8:12

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2010

MARIA MONTOYA
J & J PELISSARI INC
11247 SAN JOSE BLVD., APT. 415
JACKSONVILLE, FL 32223

SUBJECT: J & J PELISSARI INC
Ref. Number: P08000105085

We have received your document and check(s) totaling $43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 910A00005280

COVER LETTER

TO: Amendment Section
  Division of Corporations

NAME OF CORPORATION: _____ J & J PELISSARI INC _____

DOCUMENT NUMBER: _____ P08000105085 _____

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

Please return all correspondence concerning this matter to the following:

<table>
<tr><td align="center">MARIA MONTOYA</td></tr>
<tr><td align="center">Name of Contact Person</td></tr>
</table>

<table>
<tr><td align="center">J & J PELISSARI INC</td></tr>
<tr><td align="center">Firm/ Company</td></tr>
</table>

<table>
<tr><td align="center">11247 SAN JOSE BLVD APT 415</td></tr>
<tr><td align="center">Address</td></tr>
</table>

<table>
<tr><td align="center">JACKSONVILLE FL 32223</td></tr>
<tr><td align="center">City/ State and Zip Code</td></tr>
</table>

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

For further information concerning this matter, please call:

MARIA MONTOYA	at (904) 886-3108
Name of Contact Person	Area Code & Daytime Telephone Number

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

J & J PELISSARI INC

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

P08000105085

(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:

_____*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)

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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: _____

New Registered Office Address: _____
                                   (Florida street address)

_____, Florida_____
      (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

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)

Title	Name	Address	Type of Action
VP	Moises Alves Nascimento	3500 OLDFIELD CROSS APT 1118 JACKSONVILLE FL 32223	☑ Add ☐ Remove
___	___	___	☐ Add ☐ Remove
___	___	___	☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

_____

_____

_____

_____

_____

_____

_____

_____

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)

_____

_____

_____

_____

_____

The date of each amendment(s) adoption: 02/22/2010

(date of adoption is required)

Effective date **if applicable:** 02/23/2010

(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 02/23/2010

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)

MARIA MONTOYA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)