

P09000006525

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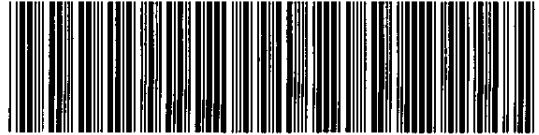
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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C.COULLIETTE

MAR 03 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LA TRATTORIA, INC.

DOCUMENT NUMBER: P09000006525

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

Please return all correspondence concerning this matter to the following:

FRANCIS W. POLLARD
(Name of Contact Person)

FRANCIS W. POLLARD
(Firm/ Company)

17881 N TAMiami TRAIL UNIT 35
(Address)

NORTH FORT MYERS, FL 33903
(City/ State and Zip Code)

For further information concerning this matter, please call:



MICHAEL ROMANO, PRESIDENT
(Name of Contact Person)

at (239) 810-6328
(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

LA TRATTORIA, INC.

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

P09000006525

(Document Number of Corporation (if known))

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TALLAHASSEE, FLORIDA

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)

17881 N TAMIAMI TRAIL UNIT 35

NORTH FORT MYERS, FL 33903

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

FRANCIS W. POLLARD

17881 N TAMIAMI TRAIL UNIT 35

NORTH FORT MYERS, FL 33903

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:

FRANCIS W. POLLARD

New Registered Office Address:

17881 N TAMIAMI TRAIL UNIT 35

(Florida street address)

NORTH FORT MYERS


(City)

Florida 33903

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>TRES</u>	<u>FRANCIS W. POLLARD</u>	<u>17881 N TAMIAMI TRAIL</u> <u>UNIT #35</u> <u>N. FT. MYERS, FL 33903</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SEC</u>	<u>FRANCIS W. POLLARD</u>	<u>17881 N TAMIAMI TRAIL</u> <u>UNIT #35</u> <u>N. FT. MYERS, FL 33903</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>V/P</u>	<u>LUIS A RIOS</u>	<u>1615 S HERMITAGE ROAD</u> <u>FORT MYERS, FL 33919</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

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

AMENDING ARTICLE 7.1 The maximum number of shares that this corporation is authorized to have outstanding at any one time is FIVE THOUSAND (5,000) shares of common stock, each having the par value of TEN DOLLARS (\$10.00).

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: FEBRUARY 22, 2009

Effective date if applicable: FEBRUARY 22, 2009

(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 FEBRUARY 12, 2009

Signature

Michael Romano, President

(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)

MICHAEL ROMANO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)