## P0900011069

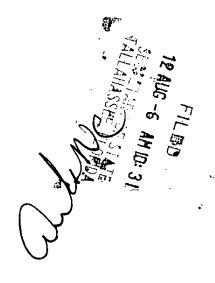
(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: FRESH CL	JTS BY JACKIE	, INC
DOCUMENT NUME	BER: P0900001106	9	
	of Amendment and fee are su		
Please return all corres	spondence concerning this ma	tter to the following:	
	ВГ	RENDA ESPINC	)SA
	<u>.</u>	Name of Contact Person	1
	BJ'S BL	JSINESS SERV	ICES, INC.
		Firm/ Company	
	6330 W	VESTWOOD AC	RES RD
		Address	
	FOR	T MYERS, FL 3	3905
		City/ State and Zip Code	•
	FREES	PIRITLIFE@AO	L.COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
BRENDA ES	PINOSA	at (239	, 939-1000
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r 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)
	ling Address endment Section		Address ment Section

'Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



July 19, 2012

BRENDA ESPINOSA 6330 WESTWOOD ACRES RD FORT MYERS, FL 33905

SUBJECT: FRESH CUTS BY JACKIE, INC

Ref. Number: P09000011069

We have received your document for FRESH CUTS BY JACKIE, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L05000051819.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 312A00019167

## Articles of Amendment to Articles of Incorporation of

FRESH CUTS BY JACK	IE, INC.		<u></u>
(Name of Corporation as	currently filed with the Florida	Dept. of State)	
P09000011069			
(Documen	t Number of Corporation (if know	n)	·····
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	u Profit Corporation adopts	s the following amendment(s)
A. If amending name, enter the new na			The second
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal	ain the word "corporation," "cation "Corp," "Inc," or "Co".	ompany," or "incorporate A professional corporation	The new ed" or the abbreviation name must contain the
B. Enter new principal office address, (Principal office address MUST BE A ST			12 ALL
C. Enter new mailing address, if appli (Muiling address <u>MAY BE A POST</u> C			FILED 31
D. If amending the registered agent an new registered agent and/or the new		Florida, enter the name o	<u>f the</u>
Name of New Registered Agent BJ'S BUSINESS SE		RVICES, INC	
Tunio of Hear Neglislanda Ligani	6330 WESTWOOD	ACRES RD	
	(Florida street add		
New Registered Office Address:	FORT MYERS	, Florida 33	905
	(City)		(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist  Signature.		<u> </u>	the position.

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:	re, and sally sill	un, 5) us un nua.	
X Change	PT John	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
() Change	PRES	MINA, ANNA	5612 8TH ST W
Add			UNIT 1
X Remove			LEHIGH ACRES, FL 33971
2) Change	PRES	MINA, JAQUELINA	5612 8TH ST W
X Add			UNIT 1
Remove			LEHIGH ACRES, FL 33971
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	<u> </u>	
	<del></del>		
	·		
		•	
·····	<u> </u>		
If an amendment provides for an eych	ango reclassifi	i <u>cation, or cancellation of issued shares,</u>	
provisions for implementing the amer (if not applicable, indicate N/A)	idment if not c	contained in the amendment itself:	
ANNA MINA - 0% SHARE	ES	· · · · · · · · · · · · · · · · · · ·	
AQUELINA MINA - 100%	6 SHARE	S	

The date of each amendment(s) adoption: // 10/2012		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
_	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated_7/16/2	2012	
Signature	sechna Vain	
(By a	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
арро	JAQUELINA MINA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	