

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090002091293)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CSH SERVICES, LLC

Account Number : I20073000160 : (800)494-3124

Phone

: (561)455-9885 Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

PASTRAMI KING, INC.

Certificate of Status	0	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$35.00	

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation

	41.0	9000209129-3
Arti	icles of Amendment	
	to	1 4 6 ° °
Artic	les of Incorporation	
	of	是是 名 个
PASTR	AMI KING, INC.	of State) RESERVED TO SERVE IN THE SERVED TO SERVE IN THE SERVED TO SERVED
	ently filed with the Florida Dept	of State)
	000079640 ber of Corporation (if known)	
(Document Aun	iber of Corporation (if known)	SOR I
Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incorp	6, Florida Statutes, this <i>Florida</i> poration:	Profit Corporation adopts the
A. If amending name, enter the new name of	the corporation:	
PASTRAMI P	KING OF FLORIDA, INC.	
The new name must be distinguishable a "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	nd contain the word "corpor "Inc.," or Co.," or the design	ation "Corp," "Inc," or
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)	CE BOX)	
D. If amending the registered agent and/or r new registered agent and/or the new registered agent and/or the new registered Agent:		lda, enter the name of the
		_
New Registered Office Address:	(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.		d accept the obligations of the
S	ignature of New Registered Agen	t, if changing

Page 1 of 3

4-09000209129-3.

.

4 09000209129-3

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>Tit</u>	<u> </u>	<u>Name</u>	Address	Type of Action Add Remove
				Add Remove
				Add Remove
E. ;	lf amending attach addit	g or adding additional Articles, enter c rional sheets, if necessary). (Be specific	hange(s) here:	
F.	provisions	dment provides for an exchange, recla for implementing the amendment if ne applicable, indicate N/A)	ssification, or cancellation of iss of contained in the amendment i	ued shares, tself:
-			·	

Page 2 of 3

4.09000209129.3.

	71-09000209129:3
The date of each amendment	(s) adoption: September 28, 2009
Effective date if applicable:	
,	(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) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/wore sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was no: 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 09/2	B/2009
Signature	En Maria
(By	a director, president or other officer - if directors or officers have not been
	oted, by an incorporator – if in the hands of a receiver, trustee, or other court intended fiduciary by that fiduciary)
	Comit Manage
	Frank Mareasa (Typed or printed name of person signing)
	President
	(Title of person signing)

Page 3 of 3