# P10000005797

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

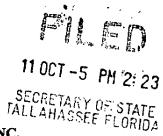
NAME OF			
CORPORATION:N	ICHELL'S CARIBBEA	N CUISINE, INC.	
DOCUMENT NUMBER:P1000000	05797		
The enclosed Articles	of Amendment and fee are	submitted for filing. Please return	all
corresp	ondence concerning this m	natter to the following:	
·	Jacqueline E. Cannav	van, Esq.	
	Jacqueline E. Canna	ıvan, PA	
	3440 Hollywood Blvd.	., Suite 415	
<b></b> .	Hollywood, FL 3	3021	
For further information	on concerning this matter, 1	please call: Jacqueline E. Cannava	in, Esq. (954) 272-2060
Enclosed is a check for	or the following amount m	ade payable to the Florida Departs	ment of State:
XX \$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 Addr	ess	Street Address	
Amendment S		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

## Articles of Amendment to Articles of Incorporation of



### NICHELL'S CARIBBEAN CUISINE, INC.

### P1000005797

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 of "incorporated" or the abbreviation "Corp., "Co". A professional corporation name must or the abbreviation "P.A."	," "Inc.," or Co.," or the de	esignation "Corp," "Inc," or
B. Enter new principal office address, if applicable: (Principal office address MUST STREET ADDRESS	FBEA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>4</u>	
D. If amending the registered agent and/or address in Florida, enter the name of the office address:		r the new registered
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	ldress)
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if cha I hereby accept the appointment as agent. I am familiar with and accept the the position.		anging Registered Agent:	registered obligations
		Signature of New Registered Agent,	if changing
	ne, and address of each	s, enter the title and name of each office a Officer and/or Director being ac	
Title	Name	Address	Type of Action
Vice President	Sheldon Smellie	2439 NW 40 <sup>th</sup> Avenue, Lauderhil	II, FL 33313 <u>RÉMOVE</u>
Vice President	Sonia Passley	2439 NW 40 <sup>th</sup> Avenue, Lauderhill, FL 33313 <u>ADD</u>	
Secretary	Sheldon Smellie	2439 NW 40 <sup>th</sup> Avenue, Lauderhi	II, FL 33313 <u>ADD</u>
	or adding additional Artic eets, if necessary). (Be spe	les, enter change(s) here: (attach ecific)	
President (45.5 33313	5%) Clifton Pratt, 2439 I	N.W. 40 <sup>th</sup> Avenue, Lauderhill, FL	
Vice President Lauderhill, FL		onia Passley , 2439 N.W. 40 <sup>th</sup> Avenue,	
Secretary (9%)	Sheldon Smellie, 2439 N.W.	40 <sup>th</sup> Avenue, Lauderhill, FL 33313	
cancellation of amendment	nent provides for an excha of issued shares, provision if not contained in the a		

The date of each amendment(s) adoption: September 16, 2011 Effective date <u>if applicable:</u>

# Adoption of Amendment(s)

### (CHECK ONE)

The amendment	(s) was/were adopted by the sh	archolders. The number of votes cast for the amendment(s)
by the shareholders	was/were sufficient for approv	al.
		hareholders through voting groups. The following statement titled to vote separately on the amendment(s):
"The number of	f votes cast for the amendment	(s) was/were sufficient for approval
by	, <i>n</i>	
-	(voting group)	
XXX The amendment action was not required		oard of directors without shareholder action and shareholder

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated September 16, 2011

Signature\_

CLIFTON PRATT, President