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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: O SOLE MIO PIZ	ZERIA INC	
DOCUMENT NUMB	ER: P10000007574		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	STELLA BURGETTO		
•		Name of Contact Person	1
	O SOLE MIO PIZZERIA IN	C	
		Firm/ Company	
	14230 W NEWBERRY ROA	•	
		Address	
	NEWBERRY, FL 32669		
		City/ State and Zip Cod	:
SBUR	GETTO@GMAIL.COM		
	_	sed for future annual report	notification)
		·	
For further information	concerning this matter, pleas	se call:	
STELLA BURGETTO		352 at (872-9044 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐S43.75 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

FILED

18 MAY -4 AH IO: 32

O SOLE MIO PIZZERIA INC (Name of Corporation as currently filed with the Florida Dept. of State) P10000007574 (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 <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) · 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: STELLA BURGETTO Name of New Registered Agent 16615 NW 171 PLACE (Florida street address) ALACHUA New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent:

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of 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: X Change	PT	<u>John Doe</u>	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change		_	
Add			
Remove			<u></u>
3) Change			
Add			
Remove			
4) Change		_	
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Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares,
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	90 days after amendment file date)
(no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.	licable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. T by the shareholders was/were sufficient for approval.	he number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/w	
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of director action was not required.	
☐ The amendment(s) was/were adopted by the incorporators was action was not required.	ithout shareholder action and shareholder
Dated	
Signature All	
(By a director, president or other of	ficer – if directors or officers have not been the hands of a receiver, trustee, or other court y)
STELLA BURGETTO	
(Typed or printe	d name of person signing)
VICE PRESIDENT	
(Tit	e of person signing)