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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	TI X an	s Restaurant of South Miam Inc
	of Amendment and fee are su	abmitted for filing.
Please return all corres	pondence concerning this ma	atter to the following:
-	(Ac	Name of Contact Person BRC Satery Firm/Company 380 SW 130 ST
	E-mail address: (to be us	Address 1. Amr FL 33186 City/ State and Zip Code 2. Serg as (estaurant net) sed for future annual report notification)
For further information	concerning this matter, pleas	se call:
	60 D	at (3 - 5) 552 - 9623 Area Code & Daytime Telephone Number
Name o	of Contact Person	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 enclosed)	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed)
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

Sergios Restaurant	of South MiAmi Inc	
(Name of Corporation as currently filed with the Flo	olida Dept. of State)	
P16000017	Q 7	
(Document Number of Corporation (if	known)	many of
	AFET A	apperate.
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following angendme	ni(2) (
·	EQ. 🚬	. Et ifui
A. If amending name, enter the new name of the corporation:	FLO 😼	
sergio's Restaurant T	#5, Inc	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	12380 SL 130 ST	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	12380 SL 130 ST MIAMI FL 33186	
	10114MI FE 33106	
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 addre		
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	vet address)	
New Registered Office Address:	. Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi		
. no. co, accept the appointment as regimered agent. I unifumital ne	and assept the varigations of the pastion.	
Signature of New Registered Ag	gent if changing	
Digitature of their Registerea Ag	gera, y enanging	

<u></u>		1 11 0	Connection	
CNAN 2127	1044		#5 Inc	<i>-0</i>
Sergis	s Rest	AMANT	2V# 5#	
			1	
			. 18****	
		Section 1		
				
<u>nendment provides f</u> ions for implementin	<u>or an exchange, red</u> of the amendment i	lassification, or	cancellation of issued shar in the amendment itself:	es,
not applicable, indica		, mor committee .		
		-		

The date of each amendment(s) adoption: \[\langle -17-13 \]
Effective date if applicable:
(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)
(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
Signature Signature Cabella Ca
(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)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
President
(Title of person signing)