P10000020107

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	isiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
X.		
1		

Office Use Only



700180702207

02/17/11--01016--016 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

AMEND

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Chea mls Restaurant Inc	
DOCUMENT NUMBER: P10000020107	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Manarchy Prahette Name of Contact Person	
Chez mls Restaurant Firm/Company	
3760 NC 3rl Arc	
Pompans Beach A 33064 City/State and Zip Code	
Phtenling Center Determined report notification) E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name 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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed)	sed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 9, 2011

MANOUCHKA PROCHETTE 3760 NE 3RD AVENUE POMPANO BEACH, FL 33064

SUBJECT: CHEZ MLS RESTAURANT, INC.

Ref. Number: P10000020107

We have received your document for CHEZ MLS RESTAURANT, INC., however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

PLEASE ADD THE CORPORATION NAME AND DOCUMENT NUMBER. To make changes to the officers, directors, or registered agent of the corporation, the current year annual report can be filed. The annual report must be filed online at our website www.sunbiz.org.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Decument Specialist Supervisor

STATE

Letter Number: 411A00003362

The second second	Articles of Amendm	ent			
	to	·			
Articles of Incorporation of					
(Name of Corporation as curr P10	Restaur	ant, Inc. ida Dept. of State) 107			
(Document Nu	mber of Corporation (if k	nown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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 abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "probable Enter new principal office address, if appropriate appropriate address MUST BE A STREET	e designation "Corp," ", ofessional association," (olicable:	Inc," or "Co". A professional	corporation SECRETAR: FILE		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) FLORE A STATE OF STAT					
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:					
Name of New Registered Agent:					
New Registered Office Address:	(Florida stree	t address)	••		
		الاستناط			
	(City)	, Florida (Zip Code)			
	, , ,,	, 2,/			

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the ers 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>Title</u>	<u>Name</u>	Address	Type of Action
孔_	<u>Penoll</u> Elvariste	pomparo Beach	☐ Add ☐ Remove
<u>P_</u>	Michalet St. Permain	Deerfiell Beach FL 33442	Add Remove
UP	Manarchy Pranelle	5225 IW GI Street	☐ Add
UP	Leo Jean	522- WEIS treat Coconut Creek 133013	
E. <u>If amendin</u> (attach addi	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific	nange(s) nere:	*1
•			
			·
E If an amai	ndment provides for an exchange, recla	esification or cancellation of issu	ied chares
provisions	for implementing the amendment if no		
(if not	applicable, indicate N/A)		
			······································
			··

The date of each and dment	(8) adoption:
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer 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/were sufficient for approval
by	
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	1-22.11
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Michalet 32 Oer MAIN (Typed or printed name of person signing) Pres, Lent
	(Title of person signing)