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C. LEWIS

JUL 7 2014

EXAMINER

COVER LETTER

Division of Corporations			
NAME OF CORPORATION: BACI TO HOLA, INC. DOCUMENT NUMBER: PIDODUD 20674			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Gerardo Fulchini Name of Contact Person BACI Trafforia, Inc Firm/Company 1918 14th Ane Address Vero Beach, FL 32960 City/State and Zip Code KScoff 8226@901.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
KARRA Fulchini at (772) 473-3489 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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee & Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee & Certificate of Status (Additional Copy is enclosed)			
Mailing Address Amendment Section Amendment Section			

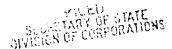
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of



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Baci	Trattoria	INC
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(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P 100 000 206	74
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA

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	NA		
	(Florida street address)		
New Registered Office Address:	NA (City)	, Florida	(Zin Code)

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.

NA.

Signature of New Registered Agent, if changing

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 John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VTD	Ottavio Ficetola	61 Tahue S.E. Terrace
Add	note: Web	ste Shows VPTD	Stuart FL
Remove		·	34997
2) Change	QTV	gerardo Fulchini	1015 Admiral SWalk Vew Beach FL
Remove			32963
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) NA	Attach additional sheets, if necessary).	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		NA
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(if not applicable, indicate N/A) NA	provisions for implementing the amer	ndment if not contained in the amendment itself:
NA NA	(if not applicable, indicate N/A)	
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(Title of person signing)
rotorogram & trabisary
(Typed or printed name of person signing)
geranda fulchini
Signature (By a director, president or office 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)
Dated June 18, 2014
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
ρλ (Λοςιμδ Βιοπό)
The amendment(s) was/were approved by the shareholders through voting groups. The Jollowing statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
Adoption of Amendment(s) (CHECK ONE)
(ου ωοις τησω 30 σολες σητείν σωσμασης)
Effective date if applicable: One 18 2014 14 JUH 19 PH 1: 54
The date of each amendment(s) adoption: The date of each amendment(s) adoption: And Signed and Signed. The date of each amendment(s) adoption: