P11000038052

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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | BEAUS C | AFE ON WHEELS | INC |
|--|---|--|--|
| C. DOCUMENT NUMBI | P 000038052 | , (, , | |
| | f Amendment and fee are st | abmitted for filing. | |
| _ | ondence concerning this ma | | |
| · · | _ | _ | |
| | | JOHNNY MATTHEW | |
| | , | Name of Contact Perso | n |
| _ | MATTHEW | & ESTRELLA | |
| | 1399 NORTH WE | Firm/Company ST 17th Ave Su | ite #308 |
| _ | | Address | |
| | | MIAMI FLORI | DA 33125 |
| - | | City/ State and Zip Cod | le |
| | tenares@inbox | com | |
| | E-mail address: | (to be used for future annua | al report notification) |
| | | \$ | |
| For further information | concerning this matter, plea | se call: | |
| JOHNN | Y MATTHEW | 786 at (| 488 1157 |
| Name of | Contact Person | Area Co | ode & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Dep | artment of State: |
| Cl \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | 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 | | Amen Divisi Cliftor 2661 l | t Address dment Section on of Corporations n Building Executive Center Circle hassee, FL 32301 |



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

14 DEC -3 PM 1: 32

November 20, 2014

JOHNNY MATTHEW MATTHEW & ESTRELLA 1399 NORTH WEST 17TH AVE - STE. 308 MIAMI, FL 33125

SUBJECT: BEAU'S CAFE ON WHEELS INC.

Ref. Number: P11000038052

We have received your document for BEAU'S CAFE ON WHEELS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 114A00024713

Articles of Amendment to Articles of Incorporation



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| | with the Flo | rida Dept, of S | State) | | |
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| umber of Cor | rporation (if k | (nown) | | | |
|)6, Florida St | tatutes, this co | orporation add | pts the following | ing amendment(| s) to its Arti |
| of the corpo | oration: | | | | |
| | | | <u> </u> | | _The new |
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| 114 | | | Florida | • | |
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| agenis I am | i jaminar will | ana accept th | e opu gations (| oj ine position. | |
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| | rrently filed 38052 umber of Co. 6, Florida S. of the corpo the word " in "Corp," ," or the abb pplicable: ET ADDRE le: FICE BOX) | cafe on wheels rrently filed with the Flo 38052 umber of Corporation (if k 06, Florida Statutes, this co of the corporation: the word "corporation," on "Corp," "Inc," or "Co ," or the abbreviation "P. pplicable: EET ADDRESS) le: FICE BOX) (Florida street (City) | cafe on wheels inc. rrently filed with the Florida Dept. of \$2,000.000.0000.0000.0000.0000.0000.0000 | cafe on wheels inc. reently filed with the Florida Dept, of State) 38052 umber of Corporation (if known) 26, Florida Statutes, this corporation adopts the following of the corporation: the word "corporation," "company," or "incorporation "Corp," "Inc," or "Co". A professional corporation," or the abbreviation "P.A." pplicable: EET ADDRESS) le: FICE BOX) (Florida street address) (Florida street address) (City) | CAFE ON WHEELS INC. rrently filed with the Florida Dept. of State) 0.38052 umber of Corporation (if known) 06, Florida Statutes, this corporation adopts the following amendment(of the corporation: the word "corporation," "company," or "incorporated" or the a on "Corp," "Inc," or "Co". A professional corporation name must ," or the abbreviation "P.A." pplicable: EET ADDRESS) registered office address in Florida, enter the name of the gistered office address: (Florida street address) (City) (Zip Code) |

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 Doe | |
|-------------------------------|----------------------------|-------------------|
| X Remove | <u>V</u> <u>Mike Jones</u> | |
| X Add | SV Sally Smith | |
| Type of Action (Check One) | <u>Title</u> <u>Name</u> | <u>Addres</u> s |
| 1) XX Change | Beau's Cafe on Wheels INC | 3601 Franklin Ave |
| Add | | Miami F1 33133 |
| Remove | | |
| 2) Change | P LEON LEONARD | 3601 Franklin Ave |
| X Add | | Miami Fl 33133 |
| Remove | | |
| 3) Change | | |
| Add | | |
| Remove | | |
| 4) Change | | |
| Add | | |
| Remove | | |
| | | |
| 5) Change | | |
| Add Remove | | |
| Kemove | | |
| 6) Change | | |
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| f an amendment p | provides for an exc | | 4 1 1 2 1 | | |
| provisions for im | plementing the amo | endment if not c | ontained in the am | endment itself: | |
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| provisions for im | plementing the amo | endment if not c | ontained in the am | endment itself: | |

| The date of each amendment(s) adoption: | , if other than the |
|---|---------------------|
| date this document was signed. | 7 7 |
| 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 | |
| ☐ 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 (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) | |
| LEON LEONARD | |
| (Typed or printed name of person signing) | _ |
| PRESIDENT | |
| (Title of person signing) | |