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SECRETARY OF STATE
AND ASSESSED TO BE STATE ASSESSED.

Amend

APR 2 3 2012

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Rockin Roast Cafe, Inc. DOCUMENT NUMBER: P1/00087916 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Vincent Simmons Rockin Roast Cafe, Inc.
Firm/ Company Sea Island Way
Address inroastcafe @ hotmail.com
address: (to be used for future annual report notification) For further information concerning this matter, please call: Vincent Simmons at (8/3) 525-3/18 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 & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

Mailing Address

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

Certificate of Status

Street Address

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

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

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The state of the s	to Articles of Incorporation	2^	LED
_	ROAST CAFE, IN	C. SECAL	9 AM 10: 34
	ly filed with the Florida Dept, of St	ate)	700.34
PI	10000 87916	- SSEX	FLORIE
(Document Number	r of Corporation (if known)	,	702
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation: A. If amending name, enter the new name of the		poration adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the	e corporation.	·	·
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co". A profession the abbreviation "P.A."	nal corporation name must	contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	able: 8815 (DDRESS) Tampa	Sea Island b , FL. 33635	say -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX) 8815 SE	ea Island Way	- - 설년 - (*) 2년 2년 -
	Tampa	.FL. 33635	i,
D. If amending the registered agent and/or regis	stered office address in Florida, ent	ter the name of the	
new registered agent and/or the new register Name of New Registered Agent			A STATE OF THE STA
86	15 Sea Island Wo (Florida street address)	ay	
New Registered Office Address:	Tampa (City)	, Florida <u>336 35</u> (Zip Code)	
New Registered Agent's Signature, if changing I	Registered Agent:		aller (C. S.
I hereby accept the appointment as registered agen		obligations of the position.	•
Signature of	New Registered Agent, if changing		

address of each Officer (Attach additional sheets		being added:	· · · · · · · · · · · · · · · · · · ·			,
Please note the officer/di P = President; V= Vice Executive Officer; CFO held. President, Treasure	President; T= Tr = Chief Financia er, Director would	easurer; S= Secretary; al Officer. If an officer l be PTD.	D= Director; TR= /director holds more	than one title, list	the first letter of each	office
Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	aves the corporati	on, Sally Smith is name				
Example: X Change	PT John D		•	no.		
X Remove X Add	V Mike J		i i i i i i i i i i i i i i i i i i i		RE NOW	•
Type of Action (Check One)	<u>Title</u>	Name		Address	ing the second of the second o	
1) X Change Add Remove	DT	Vincent C. S.			Island Way 33635	
2) Change Add Remove	DV	Zena A. Av	iles a	18126 Ba Tampa, Fl	hama Bay Dr. 33647	at .e-
Change Add Remove	<u>DV</u>	Tim M. La	ng don	1150 Josh Vista, C	1 92081	
4) Change Add Remove						
5) Change Add				. 1 .		
Remove	<i>'</i>				<u> </u>	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

_ Add _ Remove

f amending or adding additional Articles, enter change(sattach additional sheets, if necessary). (Be specific)	s) here:		grifin i juliati i n	
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some amendment provides for an exchange, reclassification of the substitutions for implementing the amendment if not contains.	<u>ined in the an</u>	<u>rendment itself:</u>	res.	
	1	47		
N/A	·			
				
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			<u></u>	

The date of each	amendment(s)	adoption: <u>4</u>	17/2012	the service of the se	<u>, , , , , , , , , , , , , , , , , , , </u>
Effective date if	applicable:		•	•	
		(no mo	ore than 90 days af	ter amendment file date)	A TOTAL CONTRACTOR OF THE PARTY
	•	-		, ,	
Adoption of Ame	endment(s)	(CHECK O	NE)	•	
		dopted by the sharehol sufficient for approval.		of votes cast for the amendm	ent(s)
				ng groups. The following sta trately on the amendment(s):	
"The nun	nber of votes cas	t for the amendment(s	s) was/were sufficie	ent for approval	
by				"	•
		(voting grou	IP)		
action was not	required. at(s) was/were ad			shareholder action and shareholder action and shareholde	
	Dated 4//r	7/2012 Incent Sim			·
	Signature	ncent Sim	mons		
	(By a c	director, president or o	other officer — if di · — if in the hands o	rectors or officers have not b f a receiver, trustee, or other	
		Vincen	t Simmo	15	
		(Typed or	r printed name of p	person signing)	
		Direct	or - Trea	surer	
		(Title	of person signing)	<u> </u>	