

P11000092336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

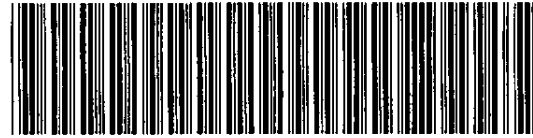
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/11/13--01023--005 **35.00

Amens

FILED
2013 FEB 26 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 26 2013
T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 12, 2013

MYRNA COUTU
TAPA THAT RESTAURANT CORP
820 LOMAX STREET
JACKSONVILLE, FL 32204

SUBJECT: TAPA THAT RESTAURANT CORP
Ref. Number: P11000092336

We have received your document for TAPA THAT RESTAURANT CORP 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 registered agent must sign accepting the designation.

The date of adoption of each amendment must be included in the document.

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.

Tina Roberts
Regulatory Specialist II

Letter Number: 913A00003429

RECEIVED
13 FEB 26 PM 9:40
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Tapa That Restaurant Corp

DOCUMENT NUMBER: P11000092336

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Myma Coutu

Name of Contact Person

Tapa That

Firm/ Company

Tapa That Restaurant Corporation

Address

820 Lomax Street Jacksonville, Fl. 32204

City/ State and Zip Code

mycoutu1944@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Myma Coutu

Name of Contact Person

at (904) 376-9941

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

☐ \$43.75 Filing Fee &
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

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

TAPA THAT RESTAURANT CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000092336

(Document Number of Corporation (if known))

FILED
2013 FEB 26 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* 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 the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

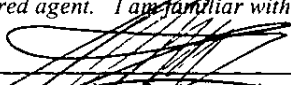
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Myrna Coutu
820 Lomax Street
(Florida street address)

New Registered Office Address: Jacksonville, Florida 32204
(City) (Zip 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.



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 Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change	<u>SVP</u>	<u>Myrna Coutu</u>	<u>820 Lomax Street</u>
<u>X</u> <u> </u> Add			<u>Jacksonville,</u>
<u> </u> Remove			<u>Florida 32204</u>
2) <u> </u> Change	<u>VP</u>	<u>Arielle Coutu</u>	<u>820 Lomax Street</u>
<u>X</u> <u> </u> Add			<u>Jacksonville</u>
<u> </u> Remove			<u>Florida 32204</u>
3) <u> </u> Change	<u>SV</u>	<u>Michael Coutu</u>	<u>820 Lomax Street</u>
<u>X</u> <u> </u> Add			<u>Jacksonville</u>
<u> </u> Remove			<u>Florida 32204</u>
4) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>
5) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>
6) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>

(Attach additional sheets, if necessary). (Be specific)

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(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____

02/06/2013

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):

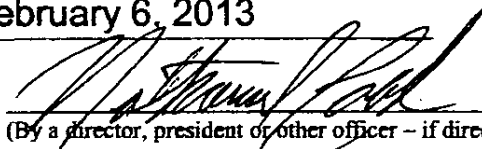
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

- ☐ 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 February 6, 2013

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)

Nathaniel Cook

(Typed or printed name of person signing)

President

(Title of person signing)