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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

NAME OF CORPORATION: Prime	10 Italian Restaurant INC
	03747
The enclosed Articles of Amendment and fee are sul	bmitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Vennis	C. Wayserman
· State ·	Name of Contact Person  Limic Italian Destaurant  Firm/ Company
1266	Beach 3/VD
	Somuelle Beach, FL 32250
E-mail address: (to be us	City/ State and Zip Code  ed for future annual report notification)
For further information concerning this matter, pleas	e call:
Vennis Laugerma Name of Contact Person	at ( 904 ) 535-9568  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation of

Pains The	Postano de Tuo
(Name of Corporation as currently filed with the F	lorida Dept. of State)
$\sim$	
(Document Number of Corporation (i	f known)
(Document Number of Corporation (1	i Kilowii)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
11/A	The new
name must be distinguishable and contain the word "corporation	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	No.
C. Enternance welling address if applicables	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	St. o =
	1/1
	- N/A 5 5
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar y	viin and accept the obligations of the position.
	4
Signature of New Registered A	Igent, 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 <math>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 De	<u>oe</u>	
X Remove	V Mike Jo	<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	$\checkmark$	Christopher L. Espo	326 Plaza St. attantic Beach FL 32233
Add Remove		·	Attantic Beach, FL 32133
2) Change	<del></del>	<del></del>	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u>,</u>		
Add			
Remove			

	<del></del>	
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_		
<u>n amendment</u> ovisions for in	provides for an exchange, reclassification, or cancellation of issued shares, nplementing the amendment if not contained in the amendment itself:	
(if not applic	cable, indicate N/A)	
	/	
	1 / 1×	
	/ / /	

The date of each amendment(s)	adoption: 8/2	7/12
Effective date if applicable:		17/12
	(no more than 90 <sup>1</sup> da	ys after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were		nber of votes cast for the amendment(s)
	pproved by the shareholders through for each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
	sst for the amendment(s) was/were suf	
by	Primo	,,,
	(voting group)	
action was not required.	dopted by the board of directors with	nout shareholder action and shareholder
DatedSignature(By a select		A directors or officers have not been ands of a receiver, trustee, or other court
щрро	Dennis	C. Waverman
	(Typed or printed name	e of person signing)
	Presid	ant
	(Title of person sign	ning)