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SECRETARY OF STATE
OIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: Half Moon Raw Bar, Inc.			
DOCUMENT NUM	BER: P1200002661	4	
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Dennis E. Hayes,	Esquire	
		Name of Contact Persor	1
	Dennis E. Hayes,	P.A.	
		Firm/ Company	
	2320 The Woods	Drive West	
		Address	
	Jacksonville, Flori	ida 32246	
		City/ State and Zip Code	8
ha	yeslaw@comcast.i	net	
		ed for future annual report	notification)
For further information	on concerning this matter, please	e call:	
Dennis E. H	ayes	at (904	, 220-3565
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	artment 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)
<u>Ma</u>	ailing Address	Street	Address
	nendment Section	Amendment Section	
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**

Half Moon Raw Bar, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P12000026614

[·]	2000020014		
(Documer	t Number of Corporation (if known	wn)	_
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flori</i> da	da Profit Corporation adopts the follow	ing amendment(s)
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or "Co".	A professional corporation name mus	abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S.			_
C. Enter new mailing address, if applia (Mailing address MAY BE A POST of the Mailing address of the Mailing address, if applia (Mailing address) address of the Mailing address	OFFICE BOX) d/or registered office address in	n Florida, enter the na me of the	12 JUN 11 AMII: 13
<u>Name oj New Registerea Agent</u>			
	(Florida street ad	idress)	
New Registered Office Address:		. Florida	
rien negisieren omte maress.	(City)	(Zip Code)	_
New Registered A gent's Signature, if c. I hereby accept the appointment as regist		and accept the obligations of the position	7.

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	CURTIS WINTER	1803 TANGLEWOOD ROAD JACKSONVILLE BEACH, FLORIDA 32250
X Remove			
2) Change	Р	RICK SAULS	126 CEDAR STREET NEPTUNE BEACH, FLORIDA 32266
Add Remove			NEPTUNE BEACH, PLUMIDA 32200
3) Change	s	RICK SAULS	126 CEDAR STREET
X Add Remove			NEPTUNE BEACH, FLORIDA 32266
4) Change	Т	RICK SAULS	126 CEDAR STREET
X Add Remove			NEPTUNE BEACH, FLORIDA 32266
5) Change			
Add Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
I/A	
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s)	adoption: JUNE 7, 2012
Effective date if applicable:	UNE 7, 2012
	(no more than 90 days after amendment file date)
Adamstan af Amardon (4/1)	(CHECK ONE)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	
	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
_{Dated} 6/7/1	2
Signature	BI II
(By a	a director, president or other officer – if directors or officers have not been
	sted, by an incorporator – if in the hands of a receiver, trustee, or other court
аррс	inted fiduciary by that fiduciary)
	Rick Sauls
	(Typed or printed name of person signing)
	President
	(Title of person signing)