## P12000044292

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



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09/25/12--01019--004 \*\*35.00



OCT - 9 2012

C. MUSTAIN

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPOR	ATION: Chez Boc's	s Inc.		
DOCUMENT NUMB	ER: P1200004429	2		
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:		
	Natalie Boccara			
		Name of Contact Person	1	
	Chez Boc's Inc.			
-		Firm/ Company	<del></del>	
	17109 North Bay	Road Apt D111		
-	<u></u>	Address		
	Sunny Isles Beac	h Florida 33160		
•	<del> </del>	City/ State and Zip Cod	e	
ella	boccara64@msn	com		
	_	sed for future annual report	notification)	
For further information	concerning this matter, please	se call:		
Natalie Bocca	ara	<sub>at (</sub> 786	503-1251	
Name o	f Contact Person		de & Daytime Telephone Number	_
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	2 N N N N N N N N N N N N N N N N N N N
	ing Address ndment Section		Address Iment Section	

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

12 OCT -8 AN 9: 00



September 26, 2012

NATALIE BOCCARA 132 RUE DES FRANGIPANIERS ST MARIE / LA REUNION FRANCE, 97638

SUBJECT: CHEZ BOC'S, INC. Ref. Number: P12000044292

We have received your document for CHEZ BOC'S, 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 designation of the registered agent must be at a Florida street address.

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 712A00024014

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed w	ith the Florida Dept. of State)		
P12000044292			
(Document Number of Corpo	oration (if known)		
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation	adopts the following amendment(	s) to
A. If amending name, enter the new name of the corpora	ation:		
name must be distinguishable and contain the word "co	rporation," "company," or "incor	porated" or the abbreviation	
"Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	c," or "Co". A professional corpo	ration name must contain the	
word characted, projessional association, of the abbre	viation 1.A.	8	
B. Enter new principal office address, if applicable:		<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	1)	5 3 3 C	
		55.	
		<u> ≫. (</u> (3)	ý
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			
D. If amending the registered agent and/or registered off	See address in Florida, onter the ne	rms of the	
new registered agent and/or the new registered office		ine of the	
Nama of Nau Pagistavad Agant			
Name of New Registered Agent		_	
		_	
(F	lorida street address)		
New Registered Office Address:	, Florid	a	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		nes of the novition	
agent and appointment as registered agent. I am for	amma man ana accept me bengani	ть ој те рознит	
		_	
Signature of New Reg	istered 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 <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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PT	Natalie Boccara	17109 N Bay Road Apt D111
X Add	- <del></del>		Sunny Isles Beach
Remove			FL 33160
2) X Change	D	Serge Boccara	17109 N Bay Road Apt D111
X Add	<u></u>		Sunny Isles Beach
Remove			FL 33160
3) X Change	V	Audrey Boccara	17109 N Bay Road Apt D111
X			Sunny Isles Beach
Remove			FL 33160
4) X Change	TS	Ella Boccara	17109 N Bay Road Apt D111
X			Sunny Isles Beach
Remove			FL 33160
5) X Change	TS	Diane Boccara	17109 N Bay Road Apt D111
X Add			Sunny Isles Beach
Remove			FL 33160
6) Change			
Add			
Remove			<del></del>

	). (Be specific)
····	
	•
f an amendment provides for an ex	change, reclassification, or cancellation of issued shares,
provisions for implementing the ar	mendment if not contained in the amendment itself:
f an amendment provides for an ex provisions for implementing the an (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
provisions for implementing the ar	mendment if not contained in the amendment itself:
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provisions for implementing the ar	mendment if not contained in the amendment itself:
provisions for implementing the ar	mendment if not contained in the amendment itself:

The date of each amendment(s) ac	loption: 10/01/2012
Effective date <u>if applicable</u> :	
<del>,</del>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
•	2012
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Natalie Boccara
	(Typed or printed name of person signing)
	President
	(Title of person signing)