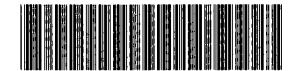
P12000055471

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300240574963

10/09/12--01012--015 **35.00



OCT 1 0 2012 C. MUSTAIN

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: SEVEN SEAS RESTAURANT CORP. P12000055471 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wilson Villar Name of Contact Person SEVEN SEAS RESTAURANT CORP. Firm/ Company **5205 NE 2ND AVE** Address MIAMI, FL 33137 City/ State and Zip Code andreswilson23@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 962-7209

Area Code & Daytime Telephone Number Wilson Villar Name of Contact Person 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SEVEN SEAS RESTAU	RANT CORP.		
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	
P12000055471			
(Documen	t Number of Corporation (if I	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fi	lorida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new na SEVEN SEAS RESTAUF		RKET CORPORATION	The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, (Principal office address MUST BE A S.			12 OCT
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		. p	FILED. 9 AM ID: 10
D. If amending the registered agent an new registered agent and/or the new	d/or registered office addre v registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent	NICOLAS PAULI	NO	
	5205 NE 2ND A	/E	
	(Florida stree	et address)	
New Registered Office Address:	MIAMI	, Florida 33137	•
	(City)	(Zip C	ode)
New Registered Agent's Signature, if a lareby accept the appointment as registered.	efed agent. I am familiar wi	ith and accept the obligations of the pa	sition.

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.

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>	<u>Name</u>	<u>Addres</u> s
1) Change	V	NICOLAS PAULINO	12590 NE 16TH AVE
X Add			APT#609
Remove			NORTH MIAMI, FL 33161
2) Change	S	ANA M. PAULINO	12590 NE 16TH AVE
X Add			APT#609
Remove			NORTH MIAMI, FL 33161
3) Change			
Add			
Remove			
4) Change	 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessar	,,. (De specific)			
					
<u>-</u> -					
·					
		```			
		<del>, / ,</del>	7		<u> </u>
		+			
		'			
		•			
					· <del>-</del> · · -
			***		
<del></del>			<u></u>		<u> </u>
	<del>,</del>				
		<u>.                                    </u>	<u> </u>	-	····
<u>n amendmen</u>	provides for an e	xchange, reclassi	ification, or can	cellation of issu	ed shares.
ovisions for i	nplementing the a cable, indicate N/A	mendment if not	contained in th	e amendment it	self:
(9	,	,			
			<del></del>		**************************************
	<u>-</u>	, 1			
		1	+	<del></del>	·
		+	1		
			<del></del>		

The date of each amendment	(s) adoption: 10/04/2012
Effective date if applicable:	10/04/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were by the shareholders was/wee	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
☐ The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statement d 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)
	(voling group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_10/4	Indre y Man Weller
(B	a director, president or other officer - if directors or officers have not been
sei an	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
**F	ANGRESW. VILLAR
	(Typed or printed name of person signing)
	Prosident
	(Title of person signing)