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SECRETARY OF STATE TALL AHASSES, FLORIDA

FILED 2: 35

C. LEWIS
FEB 2 1 2014
EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Benefit Burger INC.			
DOCUMENT NUMBER: \$130000 8 5 5 7 7			
The enclosed Articles of Amendment and fee are submitted for filling.			
Please return all correspondence concerning this matter to the following:			
Paul Deveney Name of Contact Pérson Benefit Burger Firm/Company			
1727 Shore Acres Blad ME			
St. Petersbur, FL 33703 City State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (727) 350-3/49 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
-/ -			
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Street Address Amendment Section			
DILL AG			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

APPROVED AND FILED

Articles of Amendment

Articles of Incorporation of

14 FEB 20 PM 2: 35

	SEE FLORIDA
(Name of Corporation as currently filed with the Florida Dept. of State)	alaat ** ' ' ' '
P130000 X5533	
(Document Number of Corporation (if known)	
•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folloits Articles of Incorporation:	wing amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or th	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name m 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	
(Florida street 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 with and accept the obligations of the position of the pos	on.

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 1	<u>Doe</u>	
X Remove	V Mike	Jones	
_ <u>X</u> Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Paul Deveney	1727 Shore Acres Blud N.E.
Add		,	St. Petersburg
Remove			Florida, 33703
2) Change	ρ	David Deveney	1727 Shore Acres Blod N.E
Add			St. Petersburg
Remove			Florida, 33703
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach add	itional sheets,	if necessary).	icles, enter cha (Be specific)	- · · · · · · · · · · · · · · · · · · ·		
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provision:	s for impleme	nting the ame		contained in the		
(ij noi	applicable, in	iaicaie IVA)				
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The date of each amendment(s) adoption:	14 FEB 20 PM 2: 35 , if other than the
date this document was signed.	
Effective date if applicable:	SECRETARY OF STATE
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the shape by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amendment(s) proval.
	harcholders through voting groups. The following statement coup entitled to vote separately on the amendment(s):
"The number of votes cast for the amendr	nent(s) was/were sufficient for approval
by(voting	59
(voting	g group)
The amendment(s) was/were adopted by the boaction was not required.	ard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder
Dated 2/14/2	0/4
Signature Cand	Deve
(By a director, preside	ont or other office — if directors or officers have not been orator — if in the bands of a receiver, trustee, or other court
appointed fiduciary by	y that fiduciary)
Λ .	. ^
	(Typed or printed name of person signing)
_	(Typed or printed name of person signing)
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	(Title of person signing)