P14000005966

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(Ad	dress)		
(Ad	ldress)		
(Cit	ry/State/Zip/Phone	e #)	
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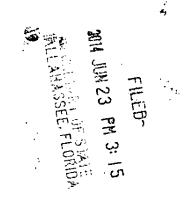
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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: LAZZIZA., IN	C
DOCUMENT NUMBER: P1400005966	
The enclosed Articles of Amendment and fee are subm	itted for filing.
Please return all correspondence concerning this matter	to the following:
MARWAN ALHAD	DAD
	Name of Contact Person
LAZZIZA RESTAU	RANT AND SWEETS
	Firm/ Company
4702 E BUSCH BL	
TAMPA, FLORIDA	Address 33617
	City/ State and Zip Code
E-mail address: (to be used	for future annual report notification)
MARWAN ALHADDAD	at (612) 618 - 0943
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pay	vable to the Florida Department of State:
\$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL.32301

Articles of Amendment to Articles of Incorporation of

FILED

LAZZIZA..INC

2014 JUN 23 PM 3: 15

LAZZIZA.,INO				<u>417</u>
•	s currently filed with the F	lorida Dept. of Sta	te) A SEE, FLO	riō#
P14000005966			SELLATAGOLLE, L.	
(Docume)	nt Number of Corporation (in	f known)	19	-
Pursuant to the provisions of section 607. ts Articles of Incorporation:	.1006, Florida Statutes, this A	Florida Profit Corp	oration adopts the following	g amendment(s
A. If amending name, enter the new na	ame of the corporation:			
N/A				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc." or "	Co". A profession		bbreviation
3. Enter new principal office address,	if annlicables	N/A		
Principal office address <u>MUST BE A S</u>				-
				_
				_
. Enter new mailing address, if appli	icable:	N/A		
(Mailing address MAY BE A POST	OFFICE BOX)	19/7		_
				_
				_
			,	_
 If amending the registered agent an new registered agent and/or the new 			er the name of the	
	MARWAN ALH	_		
Name of New Registered Agent				
	5054 CHALET (
	(Florida stre	et address)	22047	
New Registered Office Address:	TAMPA		, Florida 33617	_
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:	•		
hereby accept the appointment as regist			obligations of the position.	
-(9			
Si	gnature of New Registered A	gent, 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	V	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
() Change	Р	NAJAR, HUDA	5054 CHALET CT
Add			TAMPA, FL 33617
Remove			
2) Change	Р	ALNAJJAR, MOHAMMAD	5054 CHALET CT
Add			TAMPA, FL 33617
Remove			
3) Change	N/A	_	
Add			
Remove			
4) Change	N/A		
Add			
Remove			
5) Change	N/A		
Add			
Remove			
6) Change	N/A	<u> </u>	
Add			
Remove			

E. <u>If am</u> (Attacl	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
•	
	<u></u>
prov	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)
N/A	,,
14/74	

The date of each amendment(s) ad date this document was signed.	option: 00/10/2014	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved 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 f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
Dated 06/18/20	14	
selected	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
	MARWAN ALHADDAD	
-	(Typed or printed name of person signing)	_
	Ρ	
•	(Title of person signing)	