

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : VICTOR LERRO & COMPANY, P.A.

Account Number : 120040000118 Phone : (561)995-0064 Fax Number : (561)995-7551

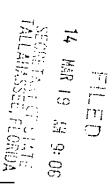
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

VLERROSVCPA.COM
Email Address:

MAR 20 2014 R. WHITE

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE RESTAURANT STORE, INC.

Certificate of Status	1
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No. 3361 P. Fax berver





March 19, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

THE RESTAURANT STORE, INC. 5 CAYUGA ROAD

SEA RANCH LAKES, FL 33308US

SUBJECT: THE RESTAURANT STORE, INC.

REF: P14000010688

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A director, president or other officer must sign accepting the adoption of amendment.

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.

Rebekah White Regulatory Specialist II

FAX Aud. #: #14000065105 Letter Number: 014A00005883

HAR 19 ANTI: 03

See Arrocad Marel

COVER LETTER

Division of Corporations					
NAME OF CORPORATION: THE RESTAURANT STORE, INC.					
DOCUMENT NUMBER: P14000010688					
The enclosed Asticles of Amendment and fee are submitted for filling.					
Please return all correspondence concerning this matter to the following:					
	VICTOR LERRO				
		Name of Contact Person			
LERRO & CHANDROSS PLLC					
Firm/ Company					
50 SW 2ND AVENUE STE 201					
Address					
BOCA RATON, FL 33432					
		City/ State and Zip Code	3		
VI	.ERRO@VCPA.CO	DM			
	_	sed for future annual report	notification)		
		•	-		
For further information	on concerning this matter, pleas	se call:			
VICTOR LEI	RRO	at (561	995-0064 de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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)		
Mailing Address			Address .		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301			
Tunumany 1 to 1 t					

No. 3361 P. 4

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SECKETANY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation of

THE RESTAURANT STORE, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P14000010688
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation edopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
CLM RESTAURANT EQUIPMENT & SUPPLIES, INC.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the 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
THERE SET THE PROPERTY OF THE SET
(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.
Signature of New Registered Agent, if changing

The date of each amendmen date this document was signed		_ if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	, , , , , , , , , , , , , , , , , , ,	
	(voling group)	
The amendment(s) was/we action was not required.	are adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated MA	RCH 18, 2014	
Signature _	Vatotino	
	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ppointed fiduciary by that fiduciary)	
	VICTOR LERRO	
	(Typed or printed name of person signing)	_
	VICTOR LERRO AS ATTY IN FACT FOR PRESIDENT, MANUEL MARTINEZ	2
	(Title of person signing)	_