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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 : THE ALHADEFF LAW GROUP, P.L.
Account Number : 120130000097
Phone : (786) 618-9703
Fax Number : (786) 350-1826

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
AMOZZARELLA USA, INC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 07 |
| Estimated Charge | \$35.00 |

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Electronic Filing Menu

Corporate Filing Menu

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June 16, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AMOZZARELLA USA, INC
1900 N. BAYSHORE DR.
1002
MIAMI, FL 33132US

SUBJECT: AMOZZARELLA USA, INC
REF: P14000016413

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.

The form submitted is for a limited liability company. Please resubmit the correct form to amend a profit corporation.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H14000140735
Letter Number: 414A00012935

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10:01:49 AM
6/16/2014

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Amozzarella USA, Inc.

DOCUMENT NUMBER: P14000014413

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Alhadeff

Name of Contact Person

The Alhadeff Law Group P.L.

Firm/ Company

3050 Biscayne Blvd., PH. 1

Address

Miami, Florida 33137

City/ State and Zip Code

mark@alhadefflaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Alhadeff

Name of Contact Person

at (786) 618-9703

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status 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

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Articles of Amendment
to
Articles of Incorporation
of

Amozzarella USA Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

PI4000016413
(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ The new 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 _____

(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

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JUN 16 11 11 PM '14
TALLAHASSEE, FLORIDA

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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 Doe
X Remove V Mike Jones
X Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change P Amozzarella USA, Inc. VIA PASCOLI 17
☐ Add DOGLIANO, MI. 20010
☒ Remove
- 2) ☐ Change VP/Sec Amozzarella S.R.L. VIA PASCOLI 17
☒ Add DOGLIANO, MI 20010
☐ Remove
- 3) ☐ Change VP/D Antonio Gallo 1900 N. Bayshore Dr. # 1002
☐ Add Miami, FL 33132
☒ Remove
- 4) ☐ Change P Antonio Gallo 1900 N. Bayshore Dr. # 1002
☒ Add Miami, FL 33132
☐ Remove
- 5) ☐ Change _____
☐ Add _____
☐ Remove _____
- 6) ☐ Change _____
☐ Add _____
☐ Remove _____

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The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)


Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 6/10/14

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Mark Alhadeff
(Typed or printed name of person signing)

att. in fact
(Title of person signing)

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