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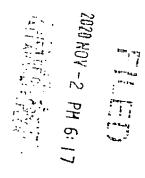
(Requestor's Name)		
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S. YOUNG

COVER LETTER

Division of Corporations *	•	* · · · · · · · · · · · · · · · · · · ·
NAME OF CORPORATION:	y's Diner in	16.
DOCUMENT NUMBER: P140	00045433	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	itter to the following:	
	Sabel Salem Name of Contact Person	
	Name of Contact Persor	1
	Firm/ Company 3841 NW 2: Address Pembrake Pines City/ State and Zip Code 500 SaleMM 6	RINC.
	Firm/ Company	
	3841 NW 2?	3 31
	Address	
	Pembrou Pines	FL 33028
	City/ State and Zip Code	ė
76	son salemm A	a act. com
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
	at (754	423 057 lde & Daytime Telephone Number
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street	Address
Amendment Section		ment Section
Division of Corporations		n of Corporations
P.O. Box 6327		entre of Tallahassee
Tallahassee, FL 32314	2415 N	N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of

JIMMY 15	DINER INC.
	filed with the Florida Dept. of State)
P 14 0000 4	-
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	510 N.E. 12573 STreet
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	NOTA MIAMI FL 33161
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	510 N.E. 125th Street
	North MIAMI FL 33161
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	, Florida
·	Chy Coue,
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
Check if applicable	17

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

Example:

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> <u>Johr</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Şall</u>	y Şmith	
Type of Action (Check One)	Title	Name	Address
1) Change	PST	Isabel salem	13841 NW 23rd St. Pembroke Pines FC 33028
Add Remove			Pembroke fines FC 33028
2) Change	P	Lyonel Blaise	SID NE 125th ST.
Add		·	N. MIAMI FL 33161
Remove Change	<u>5</u> T	MARIE Blaise	510 NE 125TA ST. N. MIAMI FL 33161
X Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

				
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ange, reclassific	cation, or can	cellation of issu	ied shares.	
ndment if not co	ontained in th	e amendment i	tself:	
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			· 	
	ange, reclassifindment if not c	ange, reclassification, or candidment if not contained in th	ange, reclassification, or cancellation of issundment if not contained in the amendment i	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) ad-	ontian:	11/23/2020	, if other than the
date this document was signed.			, wo other than the
Effective date <u>if applicable</u> :			
	(no more	e than 90 days after amendment	file date)
Note: If the date inserted in this blo document's effective date on the Dep			uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ON</u>	<u>(E)</u>	
The amendment(s) was/were adopaction was not required.	oted by the incorpora	tors, or board of directors withou	at shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		lers. The number of votes cast fo	or the amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e			
"The number of votes cast f	or the amendment(s)	was/were sufficient for approva	I
by			
,	(voting group,)	
Dated	10/2/3/202	20	
Signature	MM	fulou	
selected		ther officer – if directors or office – if in the hands of a receiver, tru iduciary)	
-		- Suk SaleM printed name of person signing)	
	(134,500	PST	
_	(Title of p	erson signing)	