P14000047696

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Cit	ty/State/Zip/Phone	: #)		
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(Bu	usiness Entity Nam	ne)		
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1/1700

COVER LETTER

NAME OF CORPORATION:

CARRIBEAN CROUNGS /NC

DOCUMENT NUMBER:

Place of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BERNARD R. BORDY

Name of Contact Person

RIBORNY & ASSOCIATES /NC.

Firm/ Company

8780 SEMINOR BLUD.

Address

SEMINOR FLA 33772

City/ State and Zip Code

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

For further information concerning this matter, please call:

BERNARD RIBORNY at (727) 397-9200

Name of Contact Person

Area Code & Daytime Telephone Number

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

\$35 Filing Fee

TO: Amendment Section

☐S43.75 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

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

CARRIBEAN CRAVINGS INC.

CARRIBEAN CRAVINGS INC	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P14000047696	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation	<u>.</u>
CARIBBEAN CRAVINGS INC	The new
name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviation. B. Enter new principal office address, if applicable: (Principal office uddress MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ntion," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:
I hereby accept the appointment as registered agent. I am famili	
Signature of Ne	w Registered Agent, 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 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>	John Doc		
X Remove	<u>V</u>	Mike Jones	<u>s</u>	
X Add	<u>sv</u>	Sally Smith	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	ame	Address
1) Change				/
Add				/
Remove			/	/
2) Change				
Add				
Remove				····
3) Change	_	_ _		
Add				
Remove				
4) Change		_ /		
Add				
Remove	/			
5) Change		·		<u></u>
Add				
Remove				
6) Change				_
Add				
Remove				

nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)	
	
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/	
amendment provides for an exchange, reclassification, or cancovisions for implementing the amendment if not contained in the	ellation of issued shares,
(if not applicable, indicate N/A)	The interior court
/	
/	

The date of each date this documen	· · · · · · · · · · · · · · · · · · ·	_, if other than the
•		
Effective date <u>if</u>	applicable:	
	e inserted in this block does not meet the applicable statutory filing requirements, this date will relive date on the Department of State's records.	not be listed as the
Adoption of Ame	endment(s) (<u>CHECK ONE</u>)	
	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval.	
	nt(s) was/were approved by the shareholders through voting groups. The following statement rately provided for each voting group entitled to vote separately on the amendment(s):	
	mber of votes cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendmen action was not	nt(s) was/were adopted by the board of directors without shareholder action and shareholder required.	
The amendment action was not	nt(s) was/were adopted by the incorporators without shareholder action and shareholder required.	
	11/12/2015 Dated	
	Signature Bernard Labridy	_
	(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 (iduciary by that fiduciary)	
	BERNARD RIBORDY	
	(Typed or printed name of person signing)	
	INCORPORATOR	
	(Title of person signing)	