P1400006925

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Na	me)
(Docu	ment Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
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SECRETARY OF STATE ATALLY SECRETARY 29 PM 3: 14

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Armadillo's Billiard	ds & Brew Inc.	
DOCUMENT NUMB	ER: P14000069705		
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
	Jon McCann		
-	· · ·	Name of Contact Person	
-	·	Firm/ Company	
ı	622 N Indiana Ave		
_		Address	
	Englewood, FL 34224		
_		City/ State and Zip Code	
Mark(Dmarkknaufcpa.com		•
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
John McCann		at (830-2011 de & Daytime Telephone Number
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Armadillo's Billiards & Brew, Inc.

ration (if known) Profit Corporation adopts the following amendment(s) to
Profit Corporation adopts the following amendment(s) to
The new
ompany," or "incorporated" or the abbreviation
A professional corporation name must contain the
SECRETARY TALLAHASSI 15 HAY 29
Florida, enter the name of the
ress)
. Florida
(Zip Code)
d accept the obligations of the position. ed 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	John McCann	2 Broadmoor Rd
Add			Rotonda West, FL 33947
Remove			
2) Change	<u>s</u>	Allen Cooper	2230 S McCall Rd
Add			Englewood, FL 34224
X Remove			TAR NSS 29
3) Change	VP	James McCann	2 Broadmoor Rd
X Add			Rotonda West, FL 33947
Remove			- 0m
4) Change	S	Beatrice McCann	2 Broadmoor Rd
X Add			Rotonda West, FL 33947
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
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an amenament provides for an exchorovisions for implementing the amei	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	£	UA
(if not applicable, indicate N/A)			
		·	
			
			

05/01/2015		
The date of each amendment(s) adoption:		if other than the
date this document was signed		
05/01/2015		
Effective date if applicable:		
(no more t	han 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's record	applicable statutory filing requirements, this date will nords.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	ı	
■ The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval.	. The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle		
"The number of votes cast for the amendment(s) wa	• •	
by(voting group)	11	
(voting group)		
 □ The amendment(s) was/were adopted by the board of direction was not required. □ The amendment(s) was/were adopted by the incorporator action was not required. . 05/18/2015 . Dated 		SECRETATALLAHA
Signature Qom McCom		FILED TARY OF ASSECT
	er officer – if directors or officers have not been f in the hands of a receiver, trustee, or other court aciary)	STATE ORIDA
John McCann		
(Typed or pr	rinted name of person signing)	
President		
	(Title of person signing)	