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Andro 10 4.30.15

COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: American		ne l la mila de se se	
DOCUMENT:NUM	BER: P150000034	50		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
-	Austin Schollme	eyer		
. 😘		Name of Contact Perso	n	
	American Greek	k, Inc.		
		Firm/ Company		
	423 Pauma Val	ley Way		
		Address	4	
	Melbourne, FL	32940		
		City/ State and Zip Cod	e	
as	chollmeyer91@g	mail.com		
 		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:	·	
Austin Schollmeyer		at (321	, 446-5686	
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		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



American Greek, inc.	
(Name of Corporation as currently filed with the Flo	rida Dept. of State)
P15000003450	
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida 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, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
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 new registered agent and/or the new registered office address: Name of New Registered Agent	s in Florida, enter the name of the
(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 Signature of New Registered Agent.	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	Garrett Karow	1080 Stratford Place
Add			Melbourne, FL 32940
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	amending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
Di	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) % of shares will be issued to Austin Schollmeyer (sole incorporator and CEO).
Spe	cifically, the 49% of shares intended for issue to Garrett Karow will be cancelled,
and	instead be combined with the 51% of shares originally intended for Austin
Sch	ollmeyer (for a total of 100% of shares in Austin Schollmeyer's ownership).

date this document was signed.	loption:	_, if other than the
Effective date if applicable:		
<u> </u>	(no more than 90 days after amendment file date)	····
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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	, 22	
· · · · · · · · · · · · · · · · · ·	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 04/20/20	den Sillen	_
(By a di	rector, president of other officer - if directors or officers have not been	
	I, by an incorporator —If in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
аррош	nationally by again materially)	
	Austin Schollmeyer	
•	(Typed or printed name of person signing)	_ •
	Incorporator, CEO	
·	(Title of person signing)	_