Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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COR AMND/RESTATE/CORRECT OR O/D RESIGN NAPLES ESTATES PIZZA MANAGEMENT, INC.

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COVER LETTER

TO: Amendment Se Division of Cor				MLLAH	15 FE
NAME OF CORPO	DRATION: NAPLES ESTAT	ES PIZZA MANAGEMEN	NT, INC.	. 60 x	65
	MBER: P15000004160F				တ်
	es of Amendment and fee are su	bmitted for filing.		F.S	Æ
	respondence concerning this ma			TATE DRIB!	3-6 AH 8:17
	Cheyenne Moseley			•-	•
		Name of Contact Person	n		
	LegalZoom.com, Inc.				
		Firm/ Company			
	100 W. Broadway Suite 10	00			
		Address			
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hh	northnaples@aol.com				
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For further informat	ion concerning this matter, plea	se call:			
Cheyenne Mosele	эу	at / 323	962-8600 ext 7950		
Nan	e of Contact Person	Area Co) 962-8600 ext 7950 de & Daytime Telephone Nu	ımber	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)		
A D P	Mailing Address mendment Section division of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address diment Section on of Corporations a Building Executive Center Circle assee, FL 32301		

Articles	f Amendment	
	to 131 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
Articles of	Incorporation of	
NAPLES ESTATES PIZ	ZZA MANAGEMENT, INC.	23
(Name of Corporation as currently filed with the	e Florida Dept. of State)	and the second
P1500	10004160	
(Document Number of Corporation	ı (if known)	<u>3</u> α
ursuant to the provisions of section 607,1006, Florida Statutes, the	is Florida Profit Corporation adopts t	he following amenda
s Articles of Incorporation:		
If amending name, enter the new name of the corporation:		
		The ne
ame must be distinguishable and contain the word corpora		
Corp., "Inc.," or Co.," or the designation "Corp.," Inc. of chartered." "professional taxociation." or the abbreviation		iame musi contain ti
Enter new principal office address, if applicable:	10265 N Tamiami Trail #3	
Principal office address MUST BE A STREET ADDRESS)		
	Naples Florida 34108	
Enter new malling address, if applicable:	10265 N Tamiami Trali #3	
(Mailing address MAY BE A POST OFFICE BOX)		
	Naples, Florida 34108	
If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent Anthony Comeriato		
10265 N Tamiami Tra	ii #3	
چې د د د د د د د د د د د د د د د د د د د	street address)	
New Registered Office Address: Naples	Florida 34108	
(Gu	n C	p Code)
돈이 관하님은 전화를 하다면 하다고 있는데 한 만나 사고 한 사람들은 하다 보다 되었다.		
Department Agant's Signature of Shaughan Burkened		
ow Registered Agent's Signature, if changing Registered Agenterly accept the appointment as registered topol. I goo familia		

Page 1 of 4

بعدد شابشا ليبة بتيكسا سياس بالماييك بالاسراكية	أحارب فللمستح مستحدث أرابيه	المتناه فالمتناث والمستحد والمتناث والمت والمتاث والمتاث والمتاث والمتاث والمتاث والمت والمتاث والمتاث والمتاث والمتاث والمتاث وا	خدر شاه منظم المستوالي المستوالية المستوالية المستوالية المستوالية المستوالية المستوالية المستوالية المستوالية
			가 보고, 보고 있는 사람들은 사람들이 가능한 경기를 받는 것은 것이다. 하는 사람들이 가득하고 있는 사람들이 사람들이 가득하고 있다.
			director being removed and title, name, and
address of each Officer (Attach additional sheets		ecing worker:	
Please note the officer/d	irector title by the	first letter of the office tide:	
P. =: President; V= Vice	President; T= Tri	easurer; S= Secretary, D= Director, TR=	Trustee: C = Chairman or Clerk: CEO = Chief than one title, list the first letter of each office
held President Treasure			man the thic use the just terms of each office
Changes should be noted	d in the following r	number. Currently John Doe is listed as the	PST and Mike Jones is listed as the V. There is
a change, Mike Jones lei Mike Jones, V. as Remov	aves the corporation and Sally Smith	on, Sally Nmith is named the V and S. These	should be noted as John Doe, PT as a Change.
Example:	c, una bany billing		
<u>X</u> Change	PT John D	<u>oe</u>	
X Remove	<u>v</u> <u>Mike J</u>	<u>ones</u>	
X Add	SV Salty S	mith	
and the second second	revaria		
Type of Action (Check One)	<u>Titlo</u>	Mame	Address
되는 이 없는 사람들이 함께	PTSD	Anthony Comeriato	.10265 N Tamiami Trail #3
1)Change		Awitony Comertaio	
X Add			Naples, Florida 34108
Remove			
2) Change	PO	GREGORY'S BROWN	103 PELICAN CIRCLE
Add			DAYTONA BEACH, FL 32118
X Remove			
3) Change	TS	DEBRAA	103 PELICAN CIRCLE
Add			DAYTONA BEACH, FL 32118
Remove			
4)Change			
Add			
Remove			
ACTION OF			
5) Change			
Add			
Remove			
6)Change			
Add			

بالمالية المالية	
E. I	Samending or adding additional Articles, enter change(s) here:
(4	Attach additional sheets, if necessary): (Be specific)
<u> </u>	cle III. The purpose for which this corporation is organized is: Food and Beverage (Service)
Artic	cle IV. The number of shares the corporation is authorized to issue is: 50
-	
-	
	사용하다 생생님이 있는 것이 되었다. 그런 사용이 되었다. 그는 사용에 보고 있는 것이 되었다. 그는 것이 되었다. 그는 것이 되었다. 그는 것이 없는 것이 되었다. 그는 것이 없는 것이 없는 것
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<u> </u>	
· .	
F. <u>H</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate NA)

	그는 땅이 되는 것 같은 이 물로 가는 모양되는 것 같습니다. 그는 사이를 가장 하는 것 같아 없는 것 같아 사람들이 되었다. 그는 사람들이 살아 없는 것 같습니다.
	얼마 전문에 지하고 있다고 있다면 그렇지만 하고 있다면 생
The date of each amendment(s) a	idoption: 1/22/2016 if ot
date this document was signed.	
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
Lif The antendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were ap	proved by the shareholders through voting groups. The following statement
must be reporately provided for	
	r each noting grown entitled to note committed in the mendments
	reach voting group entitled to vote separately on the amendment(s):
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