P15000015287

(Requestor's Name)			
(Address)			
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Na	me)	
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		





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AUG & 2016 C LEWIS



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2016

AVA N. THOMPSON-SAMUELS 13440 SW 29TH COURT DAVIE, FL 33330

SUBJECT: REGGAE PON THE GRILLE, INC.

Ref. Number: P15000015287

We have received your document for REGGAE PON THE GRILLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

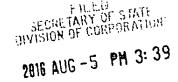
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 916A00014179

Articles of Amendment to



Articles of Incorporation

P150000 15287

	(Document Number of Corporation	. (It kilowii)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Florida Profi	Tit Corporation adopts the following an	nendme
A. If amending name, enter the new nar	me of the corporation:	•	
		The	
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associati	ation "Corp," "Inc," or "Co". A proj	ny," or "incorporated" or the abbre fessional corporation name must cont	viation ain the
B. Enter new principal office address, it			
(Principal office address <u>MUST BE A ST</u>	REET ADDRESS)		
	· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
	NFFICE BOX) Nor registered office address in Florid registered office address:		
(Malling address MAY BE A POST O	NFFICE BOX) Nor registered office address in Florid registered office address:		
D. If amending the registered agent and new registered agent and/or the new	NFFICE BOX) Nor registered office address in Florid registered office address:		
D. If amending the registered agent and new registered agent and/or the new	Jor registered office address in Florid		
D. If amending the registered agent and new registered agent and/or the new	Nor registered office address in Florid registered office address: Ava Thompson 13440 Sw 2A	•	

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	PT John	Doe	
X Remove	V Mik	e Jones	, ·
_X Add	SV Splly	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Sec.	Diameon Nelson	13440 SW LATCH
Add			PAVIE FL. 3332
Remove			·
2) Change			
Add			
Remove		•	
3) Change			
Add			
Remove		•	
4) Change	,		
Add			
Remove		,	·
5) Change			
Add			
Remove			
6) Change	•	•	
Add			· · ·
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
•	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
	MA
	MA
	MA
	MA

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature (By addrector 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 fiduciary by that fiduciary) Ava N. Tho MISON
(Typed or printed name of person signing)