P15000039989

| (Re | questor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: MARINA'S PIZZA | A PASTA INC. | |
|--|---|--|--|
| DOCUMENT NUMB | P15000029989 | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | SOCCORSA MARINA COI | LANDREA | |
| | · · · · · · · · · · · · · · · · · · · | Name of Contact Person | 1 |
| | MARINA'S PIZZA PASTA | INC. | |
| • | | Firm/ Company | |
| | 1723 LAKEWOOD RANCH | I BLVD. | |
| | | Address | |
| | BRADENTON, FL 34211 | | |
| • | | City/ State and Zip Cod | e |
| colane | dreaa@yahoo.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| | a concerning this matter, pleas | | 560.0706 |
| SOCCORSA MARIN | | at (|) |
| Name o | of Contact Person | Area Co | de & Daytime Telephone Number |
| 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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Ameno Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301



May 28, 2015

Soccorsa Marina Colandrea Marina's Pizza Pasta Inc 1723 Lakewood Ranch Blvd. Bradenton, FL 34211

SUBJECT: MARINA'S PIZZA PASTA, INC.

Ref. Number: P15000029989

We have received your document for MARINA'S PIZZA PASTA, 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):

Please sign the amendment form as the director in the space provided at the bottom of page 4.

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.

Annette Ramsey Regulatory Specialist II

Letter Number: 415A00011227



Articles of Amendment to* Articles of Incorporation of

FILED

| MARINA'S PIZZA PASTA INC. | | 0: 29 |
|---|--|--------------------------------|
| (Name of | Corporation as currently filed with the Florida D | ept. Mr. State) 19 PM 3:33 |
| 215000029989 | | WHITTE OF SHATE |
| | (Document Number of Corporation (if known) | MLEATATATION |
| ursuant to the provisions of section 607.10 s Articles of Incorporation: | 06, Florida Statutes, this <i>Florida Profit Corporation</i> | adopts the following amendment |
| . If amending name, enter the new nam | e of the corporation: | |
| | n the word "corporation," "company," or "incoion "Corp," "Inc," or "Co". A professional corpn," or the abbreviation "P.A." | |
| . Enter new principal office address, if a Principal office address MUST BE A STR | | |
| Enter new mailing address, if applica (Mailing address MAY BE A POST OF) If amending the registered agent and/onew registered agent and/or the new remaining the registered agent. | or registered office address in Florida, enter the r | name of the |
| Name of New Registered Agent | | |
| _ | (Florida street address) | |
| New Registered Office Address: | | , Florida |
| | (City) | (Zip Code) |
| ew Registered Agent's Signature, if chan hereby accept the appointment as registere | nging Registered Agent: ed agent. I am familiar with and accept the obligat | ions of the position. |
| | Signature of New Registered Agent if changing | 10 |

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 <math>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 | ST | ANTONIO COLANDREA | 1723 LAKEWOOD RANCH |
| X Add | | | BLVD |
| Remove | | | BRADENTON, FL 34211 |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3)Change | | | - |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | ······ | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) |
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| , | |
| f an amendment provides for an exch | hange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| | |
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| * * * | 04/20/2015 | |
|--|---|-------------------------------|
| The date of each amendment(s) a | doption: | , if other than th |
| date this document was signed. | | |
| - · · · | 20/2015 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | | |
| Note: If the date inserted in this document's effective date on the De | block does not meet the applicable statutory filing requirements, this department of State's records. | late will not be listed as th |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adby the shareholders was/were so | opted by the shareholders. The number of votes cast for the amendment ufficient for approval. | (s) |
| ☐ The amendment(s) was/were ap must be separately provided for | proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s): | <i>ient</i> |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| • | (voting group) | |
| ☐ The amendment(s) was/were ad action was not required. | opted by the board of directors without shareholder action and sharehold | der |
| ☐ The amendment(s) was/were ad action was not required. | opted by the incorporators without shareholder action and shareholder | |
| Dated_6- | 15-2015 Decom Mais Colden | |
| (By a c | director, president or other officer—if directors or officers have not beer ed, by an incorporator—if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary) | |
| | SOCCORSA MARINA COLANDREA | |
| | (Typed or printed name of person signing) | |
| | DIRECTOR | |
| | (Title of person signing) | |