## P15000056727

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SEP 1 9 2015 C. CARROTHERS

## COVER LETTER

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TO: Amendment Section Division of Corporations Palmetto Restaurant, Inc. NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marlyn J. Wiener Name of Contact Person Marlyn J. Wiener, P.A. Firm/ Company 6111 Broken Sound Parkway NW, Suite 330 Address Boca Raton, FL 33487 City/ State and Zip Code marlyn@mwfloridalaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561 Area Code & Daytime Telephone Number Marlyn J. Wiener Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## **Articles of Amendment** to . Articles of Incorporation of

( <u>Name</u>	of Corporation as curre	ntly filed with the Florida Dept. of St	tate)		
Palmetto Restaurant, Inc. P1500005672	.7				
	(Document Number	of Corporation (if known)		7	•
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the	he following amendi	nent(s) to	ı
A. If amending name, enter the new n	ame of the corporation:				
			The n		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	uation "Corp," "Inc," or	"Co". A professional corporation n	" or the abbreviati name must contain t	on he	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		21747 State Road 7	\$.50 \$.50	2	
		Boca Raton, FL 33428	12 T	6 SEP	, e,
•			523	ŧ.	ţ
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		21747 State Road 7	7.7.51	AH 12	C
		Boca Raton, FL 33428	70 (T)	ආ	
				•	
D. If amending the registered agent an new registered agent and/or the ne			<u>he</u>	•	
Name of New Registered Agent	Geoffery Domergue				
	21747 State Road 7				
	(Florida street address)				
New Registered Office Address:	Boca Raton	, Florid	33428 da		
		(City)	(Zip Code)	•	

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered 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.

X Change	PT	John Doc				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	VP	Joseph Bilotti	4755 Technology Way #101			
Add			Boca Raton, FL 33431			
X Remove						
2) Change	<u>.</u>					
Add		•				
Remove						
3) Change						
Add						
Remove						
4) Change	<del></del>					
Add						
Remove						
5)Change						
Add						
Remove						
6) Change						
Add						
Remove						

(Attach addition	adding additional Art all sheets, if necessary).	(Be specific)	ects) nere.			
				· · · · · · · · · · · · · · · · · · ·	·	
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				•		
If an amendme	ent provides for an excl implementing the amo	iange, reclassific	ation, or cance	llation of issued sh	iares.	
(if not app	plicable, indicate N/A)	nument if not co	miamed in the a	incument usen.		
			<del></del>		<u> </u>	
	Kgs and the same a					
			<u>.</u>	<u> </u>		

Effective date if applicable:		
	(no more th	an 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep		pplicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were suf		The number of votes cast for the amendment(s)
		s through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes east t	for the amendment(s) was	s/were sufficient for approval
by	(voting group)	,,
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of direc	ctors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators	without shareholder action and shareholder
June 15, 20	16	
Dated	10	
Signature		<del></del>
(By a di		officer - if directors or officers have not been
	1, by an incorporator – it ed fiduciary by that fiduc	in the hands of a receiver, trustee, or other court iary)
	Geoff Domergue	
	(Typed or pri	nted name of person signing)
	President	
		Fitle of person signing)