## 30074727

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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Plur	n Restai	epant, Inc				
DOCUMENT NUMBER: D 150000 74 72 7							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
-	Sofi	Name of Contact Person	in				
-	Firm/ Company						
-	18250 COLL	Address	rue				
-	Sunny Ysl	Seach 1	rue -4 33160.				
	v	0.0, 2					
	E-mail address: (to be use	ed for future annual report	notification)				
For further information	concerning this matter, please	e call:					
Sofia	Shifpin	at ( 786	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	irtment of State:				
🔽 \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filling Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
	ling Address Indment Section		Address Iment Section				

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Plum Restaurant, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000074727 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company." or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (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 and accept the obligations of the position. Signature of New Registered Agent, if changing

address of each Office	rand/or	Director be	s, enter the title and name of each office eing added:	er/director being removed and title, name, and
(Attach additional sheet				·
			irst letter of the office title:	
P = President; V = Vice	Presider	nt; T= Trea	asurer; S= Secretary; D= Director; TR=	Trustee; C = Chairman or Clerk; CEO = Chief
held. President, Treasur	e Chiej	rinanciai ( torwould k	Officer. If an officer/director holds mor	e than one title, list the first letter of each office
				ne PST and Mike Jones is listed as the V. There is
a change, Mike Jones le	aves the	corporation	n, Sally Smith is named the V and S. Thes	se should be noted as John Doe, PT as a Change,
Mike Jones, V as Remov	e, and Sa	ılly Smith, S	SV as an Add.	
Example:				
X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action	<u>Title</u>		Name	<u>Addres</u> s
(Check One)				
1) Change	VPS	<u>.</u>	ZVIRA ZICHERMAN	18250 Collins Ave
Add				18250 Collins Ave Sunny Yoles Beach Ft 33160
_ <b>X</b> Remove				
2) Change		<del>_</del>		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		<del>_</del>		
Add				
Remove				

5) \_\_\_\_ Change

\_\_\_\_ Add

6) \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_ Remove

\_\_ Remove

Attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
orovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:

	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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	
by	
(voting group)	
☐ 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 a.director, 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)	<del></del>
SOFIA SHIFRING  (Typed or printed name of person signing)	<del></del>
(Title of person signing)	
(Title of person signing)	