P15000086060

	"
(Requestor's Name)	
(Address)	"
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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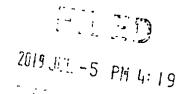
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GRAHAM'S SMO	KEHOUSE RESTAURA	NT INC.
DOCUMENT NUME	BER: P15000086060		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	GRAHAM LYLE		
		Name of Contact Person	on
		Firm/ Company	
	6006 N ATLANTIC AVE		
		Address	
	COCOA BEACH, FL 32931		
	<u>.</u>	City/ State and Zip Coo	le
VICK	I@TAYLORLOCKARD.CC	DM .	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information	n concerning this matter, pleas	se call:	
GRAHAM LYLE		at (501-6885
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Cliftor	Address dment Section on of Corporations on Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



GRAHAM'S SMOKEHOUSE RESTAURANT INC.

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following Articles of Incorporation:	ng amendment(s)
Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following	ng amendment(s)
	ng amendment(s)
A. If amending name, enter the new name of the corporation:	
IOANNE'S BEACHSIDE CAFE, INC.	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the of Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
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 office address:	
Name of New Registered Agent	<u> </u>
(Florida street address)	_
New Registered Office Address:, Florida	
(City) (Zip	Code)
iew Registered Agent's Signature, if changing Registered Agent:	
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 = Chiej 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	<u>Sally Sr</u>	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		-		
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		-		
Add				
Remove				

Attac	ing or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)	
fan	ndment provides for an exchange, reclassification, or cancellation of issued shares,	
prov	ns for implementing the amendment if not contained in the amendment itself: or applicable, indicate N/A)	
,	n applicable, maicale NA)	
	· · · · · · · · · · · · · · · · · · ·	
		_

	endment(s) adoption: if other than t
ate this document w	ಸ್ತು signal.
ffective date <u>if ap</u>	Heable: AU9, 1 ZO 19 (no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
	serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a date on the Department of State's records.
Adoption of Amend	Iment(s) (CHECK ONE)
	s) was/were adopted by the shareholders. The number of votes east for the amendment(s) ers was/were sufficient for approval.
	s) was/were approved by the shareholders through voting groups. The following statement ly provided for each voting group entitled to vote separately on the amendment(s):
"The numb	er of votes cast for the amendment(s) was/were sufficient for approval
by	(valing group)
	(voting group)
The amendment(action was not re	s) was/were adopted by the board of directors without shareholder action and shareholder quired.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder quired.
D Si	gnature 2019
•	(By a director, president or other officer - if directors or officers have not been
	setocted, by an incorporator - if in the hands of a receiver, trustee, or other comt
	appointed fiduciary by that fiduciary)
	GRAHAM LYLE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)