# P16000004526

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	SKEEBO'S RIB SHACK, I	NC.		
DOCUMENT NUMB	ER:	P16000004526	<u> </u>		
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
		DOMENIC H. CALICCHI	A		
Name of Contact Person					
	PROFES	SIONAL ACCOUNTING SERVICE, INC			
-		Firm/ Company			
1520 BOTTLEBRUSH DR. NE					
Address					
PALM BAY, FL 32905					
<del>-</del>		City/ State and Zip Cod	e		
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
DOMENIC H. CALIC	CCHIA	321	951-8878 ) de & Daytime Telephone Number		
Name 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			Address		
	ndment Section	Amendment Section			
	ion of Corporations Box 6327		Division of Corporations Clifton Building		
	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

### SKEEBO'S RIB SHACK, INC.

to

( <u>Name</u>	of Corporation as currentl	y filed with the Florida Dept. of S	State)
	P16000004	526	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts	the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or "	Co". A professional corporation	
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A S			
			= = = = = = = = = = = = = = = = = = = =
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2280 HARRIS AVE. NE	当りませ
		PALM BAY, FL 32905	77.7
			<u>.</u>
D. If amending the registered agent an new registered agent and/or the new	id/or registered office addr w registered office address:	ess in Florida, enter the name of	<u>the</u>
Name of New Registered Agent	LISA ROSSER		
<u></u>	2280 HARRIS AVE. NE		<del></del>
	(Florida stre	ret address)	
New Registered Office Address:	PALM BAY	. Flor	32905
New Registered Office Address.		City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accent the obligations of th	a position
Thereby accept the appointment as regist		2 120	e position.
	JUL P	USILV	
_	Signature of New <b>K</b>	egistered 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.

Example: X Change	<u>PT</u>	John Doe		
X Remove	V	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	Р	LILBOURN L. PARROTT, SR	3 EDGE HILL LANE	
Add			VOORHEES, NJ 08043	
XX Remove				
2) Change	SEC	IETTA V. PARROTT	3 EDGE HILL LANE	
Add			VOOHREES, NJ 08043	
XX Remove				
3) XX Change	VPS	LISA ROSSER	2280 HARRIS AVE, NE	
Add	·		PALM BAY,FL 32905	
Remove				
4) XX Change	РТ	DARCY R. JENKINS	2280 HARRIS AVE. NE	
Add			PALM BAY, FL 32905	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove			•	

itach additional sheets, if necessary).	(Be specific)			
				· · · · · · · · · · · · · · · · · · ·
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	<del></del>			
				<u> </u>
			<del></del>	
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification endment if not conta	on, or cancellation ained in the amen	n of issued shares, dment itself:	
				<u></u>

The date of each amendment(s) added this document was signed.	doption:	, if other than the
Effective date if applicable:		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendmen fficient for approval.	t(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and sharehol	der
action was not required.	pted by the incorporators without shareholder action and shareholder	
Signature (By a diselected	irector, president or other officer – if directors or officers have not been done incorporator – if in the hands of a receiver, trustee, or other coed fiduciary by that fiduciary)	
аррони	LISA ROSSER	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	