## P160000/8408

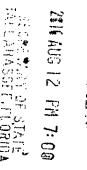
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AUG 23 2016

C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: La Grignote Inc. DOCUMENT NUMBER: P16000018408 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gregory S. Oropeza, Esq. Name of Contact Person Smith Oropeza Hawks Firm/ Company 138-142 Simonton Street Address Key West, FL 33040 City/ State and Zip Code Contact@lagrignotecafe.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gregory S. Oropeza 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 enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** 

Amendment Section

Clifton Building

**Division of Corporations** 

2661 Executive Center Circle Tallahassee. FL 32301

Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

La Grignote Inc.		
(Name of Corporation as curre	itly filed with the Florida Dept. of S	State)
P16000018408		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts	the following amendment(s
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation.	l" or the abbreviation
, ,	1211 Duval Street	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Key West, FL 33040	- 1887 <del>- 2</del>
		THE TREE TO THE TREE TREE TO THE TREE TREE TREE TREE TREE TREE TREE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1211 Duval Street	
	Key West, FL 33040	
D. If amending the registered agent and/or registered office ad		the_
new registered agent and/or the new registered office addre	ss:	
Name of New Registered Agent		
(Florida .	street address)	
New Registered Office Address:	. Flor	ida
	(City)	(Zip Code)
N. B. ta. I. al. Cr. a. a. a. b. b. a. a. a.		
New Registered Agent's Signature, if changing Registered Ages I hereby accept the appointment as registered agent. I am familia		ne position.
	, ,	r
- 12-44-0-47		
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.

Example: X Change	<u>PT</u>	John Doc			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	D	Joel Bernard Lucien Odou	1211 Duval Street		
X Add			Key West, FL 33040		
Remove					
2) x Change	РТ	Joel Odou	1211 Duval Street		
Add			Key West, FL 33040		
Remove					
3 ) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		·			
Add					
Remove					
6) Change					
Add					
Remove					

	(Be specific)
***	
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f an amendment provides for an excl provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s)	adoption:		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 thi document's effective date on the		not meet the applicable statutory filing requirements, this date will State's records.	I not be listed as the
Adoption of Amendment(s)	(CH	ECK ONE	
The amendment(s) was/were a by the shareholders was/were		shareholders. The number of votes cast for the amendment(s) approval.	
☐ The amendment(s) was/were a must be separately provided f	pproved by the or each voting	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amen	ndment(s) was/were sufficient for approval	
by	<del></del> -		
	(voti	ing group)	
The amendment(s) was/were a action was not required.	dopted by the b	board of directors without shareholder action and shareholder	
The amendment(s) was/were as action was not required.	dopted by the in	neorporators without shareholder action and shareholder	
August 8 Dated	3, 2016		
	- 182		
Signature	· · · · · · · · · · · · · · · · · · ·		_
select	ed, by an incor	dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
		Typed or printed name of person signing)	<del>-</del>
	Joel Odou	ed -	
		(Title of person signing)	<del></del>