## P16000040209

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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2016 JUN -- 8 PM 3: 0

SECRETARY OF STATE
OFFISION OF CORPORATIONS

JUN 1 0 2016

C LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION:THACK	K ENTERPRISE "INC"	
DOCUMENT NUMBE	R:	00040209	·····
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
St	tephen M. Stone, Esquire		
_		Name of Contact Person	ו
Li	aw Offices of Stephen M. S	tone	
_		Firm/ Company	<del></del>
73	25 North Magnolia Avenue	, ,	
<del></del>		Address	
0	rlando, Florida 32803		
_		City/ State and Zip Cod	E C
s	mstonelaw@cfl.rr.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information of	oncerning this matter, pleas	e call:	
Stephen M. Stone, Esqu	ire	at (	423-7910
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for the	he following amount made p	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)
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATION.

2016 JUN -8 PM 3:01

## THACK ENTERPRISE "INC"

(Name of Corpora	tion as currently filed with the Florida Dept. of State)
	P16000040209
(Docu	ument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floring Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the of the of the Control of the of	corporation:  The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or th	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET AD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u> )
D. <u>If amending the registered agent and/or regist</u> new registered agent and/or the new registered	ered office address in Florida, enter the name of the d 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 Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations of the position.
Sig	nature 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 <math>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 Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	ISTA NIGHT CLUB INC	57 W PINE STREET
Add	•		ORLANDO, FL 32801
X Remove			-
2) Change	P	RUDRANAUTH THACKURDEN	2302 ANACOSTIA AVENUE
X Add			OCOEE, FL 34761
Remove			
3 ) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
. 3	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	if other than the
date this document was signed.	SECRETARY OF STATE DIVISION OF CORPORATION
Effective date if applicable:	- Surestifie
(no more than 90 days after amendment file	date) 2016 JUN - 8 PM 3: 01
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	ments, this date will 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 by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amend	
"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 a action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and staction was not required.	hareholder
June 3, 2016 Dated	
Signature	
(By a director, president or other officer - if directors or officers h	ave not been
selected, by an incorporator – if in the hands of a receiver, trustee.	
appointed fiduciary by that fiduciary)	
Stephen M. Stone, Esquire	
(Typed or printed name of person signing)	
Attorney/Authorized Representative	
(Title of nerson signing)	<del></del>