P160000 67676

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	tate/Zip/Phone	#)
PICK-UP	MAIT WAIT	MAIL
(Busin	ess Entity Nami	e)
(Доси	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	

Office Use Only

663.



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12/12/19--01/09--024 **85.00

1020 FEP 13 PM 1:29

C GOLDEN FEB 2 0 2020

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	04 00-0	y Catering 67676	Inc	
The enclosed Articles of	f Amendment and fee are su	bmitted for tiling.		
Please return all corresp	ondence concerning this ma	tter to the following:		
- - -	Murphy Ca 4017 CiU Orlando	Address FL 32812 City/ State and Zip Code	w .	
E-mail address? (to be used for thure annual report notification) For further information concerning this matter, please call: SAUROSA CPA at (407), 694-2605				
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for \$35 Filing Fee	the following amount made \$\Bigsim\\$43.75 Filing Fee & Certificate of Status	payable to the Florida Depa \$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		



January 21, 2020

EMILY K ROBERTS MURPHY 4017 LILLIAN HALL LANE ORLANDO, FL 32812

SUBJECT: MURPHY CATERING INC

Ref. Number: P16000067676

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 320A00001444

Claretha Golden Regulatory Specialist II

2020 FEB | 3 | ATTI: 4.6

www.sunbiz.org

www.sumbiz.org

Articles of Amendment to

2020 FT 13 PH 1:29

Articles of Incorporation

interpret catering into		7 c. b. c. 829	60
(Name of Corporation	i as currently filed	with the Florida Dep	L of State)
(Documer	nt Number of Corp	oration (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florid</i>	a Profit Corporation a	lopts the following amendment(s
A. If amending name, enter the new name of the corp	poration:		
LAB Fitness Inc			The new
name must be distinguishable and contain the word "corp," "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	or "Co". A profe	ny," or "incorporated" essional corporation n	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u> </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 new registered agent and/or the new registered of		Florida, enter the na	ne of the
	·		
	(Florida street ada	(ress)	
New Registered Office Address:			. Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Regist			
I hereby accept the appointment as registered agent. I a	am familiar with ar	id accept the obligation	s of the position.
0:	W. D.		
Signatu	are oj ivew Register	red Agent, if changing	
Check if applicable			

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>\$V</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Remove		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				
KCHIOVC				

A A STATE OF THE S	
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N A	
	<u> </u>
	 -
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
NIA	

The date of each amendment(s) ad	option:	, 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 bl document's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without sh	archolder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes east for the ficient for approval.	e amendment(s)
	oved by the shareholders through voting groups. The follower has been ach voting group entitled to vote separately on the amen	
"The number of votes cast !	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
DatedFL	b 10,2020	
Signature	n Pluges	
(By a di	ector president or other officer – if directors or officers he by an incorporator – if in the hands of a receiver, trustee	nave not been
appoint	d fiduciary by that fiduciary)	, or other court
	Emily R Murphy (Typed or printed name of pyrson signing)	
	President	
	(Title of person signing)	

Company of the Compan