P160000 74343

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SECRETARY OF STATE

DEC 1 9 2016 T. LEMEUX



COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: PIZZA BOSS FTL, Inc. DOCUMENT NUMBER: P1600074343						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Jonathan CARCIONL Name of Contact Person						
Firm/ Company						
1879 DAVIL BIUD						
Address						
TT. LAUDERDAJE FL 33312 City/State and Zip Code						
E-mail address: (to be used for future annual report-notification)						
For further information concerning this matter, please call:						
Jonathan Carcione at 954, 610 4513						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to **Articles of Incorporation**

to

Tizzaboss	FTL. Inc.	FILED
	Corporation as currently filed with the Florid	da Dept. of State)
PI	6000074343	₩ DEC 16 P 5: 16
	(Document Number of Corporation (if know	m) SECRETARY OF STATE: TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corpor</i>	vation adopts the following amendment(
A. If amending name, enter the new nam	ne of the corporation:	
		The new
	applicable:	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/ new registered agent and/or the new	or registered office address in Florida, enter registered office address:	the name of the
Name of New Registered Agent		
_	(Florida street address)	
New Registered Office Address:		, Florida
<u></u>	(City)	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as register	nnging Registered Agent: red agent. I am familiar with and accept the ob-	ligations of the position.
	Signature of New Registered Agent, if cha	anging

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	$\sqrt{}$	LOTTIE CARCIONE	1879 DAVIL BIVD FT. LAUD. FL 33317
Add			FT. Laud. FL 33317
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
*	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption	on: OCTOBE	<u> </u>	, LDILP	, if other than the
date this document was signed.	_	_	•	
Effective date if applicable:	DCTOBER	1,2	DIL	
	(no more than 90	days after	amendment file date)	
Note: If the date inserted in this block document's effective date on the Departm		able statuto	ory filing requirements, the	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie		number of	votes cast for the amend	nent(s)
☐ The amendment(s) was/were approved must be separately provided for each				
"The number of votes cast for th	ne amendment(s) was/were	sufficient	for approval	
by			<u> </u>	
	(voting group)			
The amendment(s) was/were adopted action was not required.	by the board of directors v	without sha	reholder action and share	eholder
The amendment(s) was/were adopted action was not required.	by the incorporators without	out shareho	lder action and sharehold	ier
Dated Doca	mble 1,	2014	,	
Signature				
	or, president or other office			
	an incorporator - if in the duciary by that fiduciary)	hands of a	receiver, trustee, or othe	r court
7	Jona	4ha	n Casc	iona
	(Typed or printed n	ame of per	son signing)	
	PRESIC	DEA	•	
	(Title o	f person sig	gning)	- · · · · · · · · · · · · · · · · · · ·