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(Re	questor's Name)	<u></u>
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(Cit	y/State/Zip/Phone	B #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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17 JAN 31 PH 6: 32 SECRETARY OF STATE TALLATIASSEE, FLORID

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Amend

JAN 3 1 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations and cheese Bar Inc. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ☐\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

is enclosed)

Articles of Amendment
to
Articles of Incorporation

Sluppy 1000 & HILL AND CHES	e all	1110	
(Name of Corporation as currently filed with the Florida Dept. of S	<u>State</u>)	,	
P160000 84428			
(Document Number of Corporation (if known)		· ·	• • •
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Co	amaratian adonts	the following am	endment(e) to
its Articles of Incorporation:	siporumora adopta	are retrevening with	enamental to
A. If amending name, enter the new name of the corporation:		<i>:</i>	
Transacting frame, enter the new name of the corporation.			
	#:	The	
name must be distinguishable and contain the word "corporation," "company," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profess	or incorporated ional corporation	name must conto	viation ain the
word "chartered," "professional association," or the abbreviation "P.A."		VD.	٠
B. Enter new principal office address, if applicable:		- W	<u>_</u>
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	<u>_</u>
		325 (1)	美丽
		SSE	<u> </u>
C. Enter new mailing address, if applicable:		m E	유 :: D
(Mailing address MAY BE A POST OFFICE BOX)			<u>စ</u> ်
		골음	သူ
			•
			
D. If amending the registered agent and/or registered office address in Florida	, enter the name	of the	
new registered agent and/or the new registered office address:	× ,		
Name of New Registered Agent ONO MY DO	invel		
12-38 (7) (1) N	ersita	Pul	
(Florida street address)			,
New Registered Office Address: (Sungrill	. F	Horida SO)
(City)	·	(Zip Co	ode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept	t the abligations.	of the position	
t taiteny accept the appointmentals registered agent. I am jaminat with and accept	. ac sengunsas	, and position.	

Page 1 of 4

Signature of New Registered Agent, if charging

address of each Office (Attach additional shee Please note the officer/P = President; V = Vic Executive Officer; CFC held. President, Treasu Changes should be note a change, Mike Jones I Mike Jones, V as Remo	r and/or Director b ts, if necessary) director title by the f e President; T= Tre 0 = Chief Financial rer, Director would ed in the following n eaves the corporatio	first letter of the office title: asurer; S= Secretary; D= Director; TR= ; Officer. If an officer/director holds more be PTD. nanner. Currently John Doe is listed as the on, Sally Smith is named the V and S. These	Frustee, C = Chairman or Clerk; CEC than one title, list the first letter of ea PST and Mike Jones is listed as the V) = Chief ach office . There is
Example: X Change	PT John D	o <u>e</u>		٠.
X Remove	V Mike Jo	ones .		
X Add	<u>SV</u> <u>Sally S</u>	<u>nith</u>		<i>:</i>
Type of Action (Check One)	<u>Title</u>	Name TMa Clary	<u>Addres</u> s	
1) Change		JULY CIGIF		-
Add Remove		_ mpDaniel,		<u>-</u>
2) Change	7	John McDonald		-
Add				_
Remove				- ,
3) Change	. .			- ,
Remove				
4) Change				<u>ــــٰــ</u>
Add .				
Remove				<u> </u>
5) Change				
Add	•			
Remove				
6) Change		· ·	·	
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Remove

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)	•	additional Arti s, if necessary).	(Be specific)			-	
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The date of each amendment(s) adoption: date this document was signed.	_, if other than the
	•
Effective date if applicable: (no more than 90 days after amendment file date)	-
	•
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	٠.,
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval by 010001000 000000000000000000000000000	• .
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11311201 Jahr MC Ox	
Signature	
(By a director, preside: Aefficer - it directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) MCONIEL	
John McDonald Jr.	
(Typed or printed name of person signing)	•
Vicepresident.	· · ·
(Title of person signing)	•