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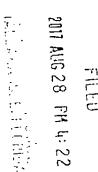
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C. GOLDEN Aug 31 2017,

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $J_{c} \leq se's - R_{ij}$	5 Shack BBQ & Seafood INC
DOCUMENT NUMBER: <u>P17000036</u>	476
The enclosed Articles of Amendment and fee are submit	tted for filing.
Please return all correspondence concerning this matter t	_
Jamaal	Jackson Jac
Ŋ	Name of Contact Person
Jesse's K	ib Shack
	Firm/ Company
2202 W	Pine St
	Address
<u>Ollando</u>	FC 32805
	lity/ State and Zip Code
	or future annual report notification)
For further information concerning this matter, please ca	II:
Jamaal Jackson	at (407) 340 9097
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:
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)
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

Jesse's Rib Shack	RRO + Spatoo	od Inc	FILEU
(Name of	f Corporation as currently file	d with the Florida D	ept. of 84 tet UG 28 PH 4: 22
P170000260	476		<u> </u>
•	(Document Number of Corp	oration (if known)	TALL VAULEE FLORIST
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this <i>Florid</i>	da Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new nar	me of the corporation:		
			The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa word "chartered." "professional associati	ation "Corp," "Inc," or "Co".	A professional corp	
B. Enter new principal office address, if (Principal office address MUST BE A ST		N/A	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		MA	·
D. If amending the registered agent and new registered agent and/or the new		n Florida, enter the n	ame of the
Name of New Registered Agent	W/1	4	
	(Florida street add	dress)	
New Registered Office Address:			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if chail I hereby accept the appointment as register	anging Registered Agent: red agent. I am familiar with a	nd accept the obligati	ons of the position.
	Signature of New Registe		<u></u>

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.

X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>CFO</u>	Cheryl Pickott	902 Santa Barbara Rol
			Ollando FL 32808
Remove			
2) Change			
Add			
Remove			
3) Change			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

, Amacii aaamonai sneets,	if necessary). (Be specific)
	N/H
	19/13
•	
•	
 	
for amount on a social	es for an exchange, reclassification, or cancellation of issued shares,
	nting the amendment if not contained in the amendment itself:
(if not applicable, in	
i 1	000
maal Jac	ISON WILL OWN OS 76 OF THE STORES OWNERS
and Dick	tson will own 85% of the threes owners of the wreaship of Shact BBQ & Seafood.
ary rae	1 MIN OWN IS 18 OF THE OWNER TRUST OX
Leavis Du	5 Shact BBQ + Segtond.
There is the	
<i>,</i>	
·	

The date of each amendment(s) adoption:, if other to date this document was signed.	han the
Effective date if applicable: August 17, 2017 (no more than 90 days after amendment file date)	
· · · · · · · · · · · · · · · · · · ·	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	l as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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.	
☐ 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" (voting group)	
(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 8/17/20/7 Signature	
(By a director, president or other officer – if 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)	
Jamaal Jackson.	
(Typed or printed name of person signing)	
Prosident	
(Title of person signing)	