

Office Use Only



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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations Circus Eats Food Truck, corp NAME OF CORPORATION: _ DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: rcus Eats Firm/Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

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Articles of Incorporation

Circus Eats!	Food Tr	Ruck				
(Name of Corporation as curre		_	ept, of State)		
	0026811			*		
Document Numbe	er of Corporation	(if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his <i>Florida Profi</i> d	t Corporation	adopts the f	ollowing amer	idment(s)	10
A. If amending name, enter the new name of the corporation:	-					
name must be distinguishable and contain the word "corpora	~/ *			The	new	
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation. B. Enter new principal office address, if applicable:	or "Co". A profé on "P.A."	essional corp	oration nam	e must contair	n the	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	3	441	$N\omega$	19 tr		
	n	liam	i,FL	19 tr 33125	<u>-</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)						
				<u></u>	2019	
					1019 SEP	= 75 U
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr		a, enter the n	ame of the	AHASS	30	###-
Name of New Registered Agent 40 jane	Blas	rdin	<i>></i>	ń. T	PH 6: 31	٠
1Florida	H N W a street address)	1_19:	<u>n</u>		36	
New Registered Office Address: Muemu	19 33 (City)	152	, Florida_	(Zip Code)		
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		ot the obligati	ons of the po	osition.		

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:

 $P \sim President; V = Vice President; T = Treasurer; S \sim Secretary; D = Director; TR + Trustee; C = Chairman or Clerk, CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.$

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.

	.ample: _Change	<u>PT</u>	John Doe	
7	Remove	\underline{V}	Mike Jones	
<u>_X</u>	<u>C</u> Add	<u>SV</u>	Sally Smith	
<u>Ty</u> (C	pe of Action heck One)	<u>Title</u>		<u>Addres</u> s
	Change	VP	Thomas Gonzalez	3441 NW 19 tr
	Add		Kemove D	Mami, PL 33125
	X Remove		, .	<u> </u>
() . 2)	_X Change >	P	Yojani Blandino	3441 NW 19 tr Miami, FL 33125
مدر د او	Add Add		_	Miami, FL 33125
reside	Remove		-	,
3)	Change			
	Add			
	Remove		-	
4)	Change			
	Add		_	
	Remove		-	
51	Change			
	Add			
	Remove		-	
6)	Change			
	Add		_	
	Remove		_	

. <u>If amending or addir</u> (Attach <i>additional she</i>	i <u>g additional Articles,</u> ets, if necessaryr — (Bo	enter change(s) hi e specific) V/A	ere:		
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If an amendment pro	ovides for an exchange	e, reclassification,	or cancellation of	issued shares,	
(if not applicable	ementing the amendm e. indicate N A)	. 1 /2	<u>a in the amename</u>	ent itsen:	
··-		N/F		_ 	
	_			.,	
					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 9/01/19	
(16) more than 90 days afte	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	ory filing requirements, 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 by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	
"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 shaction was not required.	areholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	older action and shareholder
Dated9/1/19	
Signature Blandino	
(By a director, president or other officer – if dire selected, by an incorporator – if in the hands of a appointed fiduciary by that tiduciary)	
YOJANI B	landino
(Typed or printed name of per	(son signing)
Blau	deno owner/preside
(Title of person si	gning)