## P17000057071

(Re	equestor's Name)			
(Ac	idress)			
(Ac	idress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



700331919937

07/15/19--11014--124 \*\*....00

2019 UT 15 PH 3: 1

Amend

JUL 2 3 2019

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section

**Mailing Address** 

P.O. Box 6327

Amendment Section

**Division of Corporations** 

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ISLAND JOE'S LAFE, INC The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 954 ) 559 - B309 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: X \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Street Address

Clifton Building

Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

Articles of Incorporation of

ISLAND JOE'S	CAFE, INC
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P17000057071	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(Maning address MAT BE A FOST OF FICE BOX)	777
	بب ً
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
	<u></u>
Name of New Registered Agent \(\infty\) / f4	
(Florida s	street address)
· ·	
New Registered Office Address:	(City) , Florida (Zip Code)
N	
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian	
1)/2	
Signature of New	Registered Agent, if changing

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	PT John	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	Title	Name .	<u>Addres</u> s
1) X Change	PT	CHUNG, DENNIS	N/A
Add			
Remove			
2) X_ Change	<u>5V</u>	CHUNG, OLIVIA	N/A
Add			
Remove 3) Change	<u> </u>	CHUNG, MARK	
Add			
X_ Remove			
4) Change	<u>D</u>	LHUNG, PAUL	
Add			
X Remove			
5) Change	$\overline{\mathcal{D}}$	MCBRIDE, LORI	
Add			
X Remove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	ements, this date will not be listed 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 by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the amendment.	
"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 shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
Dated 7/10/19	
Signature See See	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	6
PRESIDENT	
(Title of person signing)	<del></del>