P1700057734

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800302149958

08/07/17--01018--006 **\$2.50

2017 AUG - 7 PM 1: 07

C. GOLDEN AUG 11 2017

COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: SRQ Restaural GRoup, Inc.				
DOCUMENT NUMBER: P17000057724				
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 SRQ Restaura GRoup, Troc. Firm/ Company SSG1 Sicola Estates Court Address SAVASON, FLOMA 342472. City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Scotte Karler at (770) 843-3847 Name of Contact Person at (770) 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 Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & 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 of	FILEO
SRQ Restaurant Grou	P, DAC, 2017 AUG - 7 PM 1: 07
(Name of Corporation as currently filed with the	
1170000 +7774	SEG THEOLOGY OF STATE TALLAHASOFE, FLORIDA
(Document Number of Corporation (if	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> its Articles of Incorporation:	orporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation," "company," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profession word "chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)) <u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	/A
D. If amending the registered agent and/or registered office address in Florida, enew registered agent and/or the new registered office address: Name of New Registered Agent	enter the name of the
(Florida street address) New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept to Signature of New Registered Agent,	
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 <math>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 Johr	n Doe	
X Remove	<u>V</u> <u>Mike Jones</u>		
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Namę</u>	<u>Addres</u> s
1) Change	B PV	Mike Lordon	CHARLOTON; He, UM 2250
Add Remove			CHarloton the Us 2290
2) Change Add		Odm Kaylin	ST91 Sicota Estates Court Swaxota, Fl. 34242
Remove			
3) Change			
Add			
4) Change			
Add Remove			
5) Change			<u> </u>
Add			
6) Change	***************************************		
Add			
Remove			

<u>f amending or add</u> Attach <i>additional sh</i>	g additional Articles, enter change(s) here: ets, if necessary). (Be specific)	
	NIA	
		A
	•	
•		
 		
		<u> </u>
provisions for imp	wides for an exchange, reclassification, or cancellation of issued shares, menting the amendment if not contained in the amendment itself: e, indicate N/A)	
	MA	
	1 (1)	

The date of each amendment(s) adoption:	MA	, if other than the
date this document was signed. Effective date if applicable: (no	o more than 90 days after amendment	2017 ent file date)
Note: If the date inserted in this block does not m document's effective date on the Department of State		requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECI	K ONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro		for the amendment(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grow		
"The number of votes cast for the amendme	ent(s) was/were sufficient for appro	val
by(voting ;		'17 '
(voting)	group)	
☐ The amendment(s) was/were adopted by the boar action was not required.	d of directors without shareholder a	action and shareholder
The amendment(s) was/were adopted by the inco action was not required.	rporators without shareholder actio	n and shareholder
	017	
Signature Jutky		
	t or other officer – if directors or of rator – if in the hands of a receiver,	
appointed fiduciary by		austee, or outer court
	Scotha Kaylon	
	ped or printed name of person signin	ng)
	President	
*****	(Title of person signing)	