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Office Use Only

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	NEW BAY CUIS	NE II INC.	·
DOCUMENT NUME	BER: P18000058320		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	John K. Carter		
		Name of Contact Person	n
	Carter Reymann Law PA		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	9500 Koger Blvd.	, ,	
		Address	
	St. Petersburg, FL 33702		
		City/ State and Zip Cod	e
:-h	Danilla Ianu	,	
jonne ———	Ocrflalaw.com	100	
	E-man address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
John Carter		727	456-8970
Name o	of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a cheek for	the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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	

Tallahassee, FL 32301



August 16, 2018

JOHN K. CARTER 9500 KOGER BOULEVARD ST. PETERSBURG, FL 33702

SUBJECT: NEW BAY CUISINE III INC

Ref. Number: P18000058320

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 818A00017047



August 2, 2018

JOHN K. CARTER, ESQUIRE 9500 KOGER BOULEVARD SUITE 112 ST. PETERSBURG, FL 33702

SUBJECT: NEW BAY CUISINE III INC

Ref. Number: P18000058320

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 918A00015897

RECEIVED

18 AUG 15 PH 2: 23

SECRETARY OF STATE

TALL AHASSEE FOR

Articles of Amendment to Articles of Incorporation of

FILED

NEW BAY CUISINE III INC

2018 AUG 28 PM 2: 47

(Name of Corporation as	currently filed with the Florida Dept. of State).
P18000058320	STICRE TARY OF STATE TALLAHASSEE, FL
(Document N	Sumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
Kulik Family Restaurants, Inc.	The new
	orporation," "company," or "incorporated" or the abbreviation nc." or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.)	<u>S</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
n n	Florida street oddress)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	
Simanua	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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Şaliy Şn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add		_		
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
	
	-
f an amandmant arovides for an auch	hanga reglassification or cancellation of issued shares
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

07/24/2018	, if other than the
The date of each amendment(s) adoption:date this document was signed.	, n out
Effective date if applicable: (no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes can by the shareholders was/were sufficient for approval.	st for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	The following statement he amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for appr	roval
by (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder act action was not required.	ion and shareholder
Doed Starty Eulik	
Signature (By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receiv	officers have not been er, trustee, or other court
appointed fiduciary by that fiduciary)	
Maksym Kulik	
(Typed or printed name of person sig	ming)
President	
(Title of person signing)	_