## P18000062590

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## **COVER LETTER**

TO: Amendment Section Division of Corporace.

NAME OF CORPO	G & G Caribbean	Resturant & Bakery, Inc		
DOCUMENT NUMI	P18000082590			
The enclosed Articles	of Amendment and fee are sul	omitted for fiting.		
Please return all corre	spondence concerning this mat	tter to the following:		
	Vincent Gillimore			
		Name of Contact Persor	1	
	G & G Caribbean Resturar	t & Bakery, Inc.		
		Firm/ Company		
	745 Apalachee Parkway			
		Address		
	Tallahassee, FL 32301			
		City/ State and Zip Code	:	
keng	181@gmail.com			
		ed for future annual report	notification)	
		,		
For further informatio	n concerning this matter, pleas	se call:		
Vincent Gillimore		at (	727-4065	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Encrosed is a check to	n the following amount made,	payable to the Fioreas Dep.	umenec	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy	
Ма	iling Address	Street	Address	
	endment Section	Amendment Section		
Division of Corporations		Division of Corporations		
P.O	). Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

G & G Caribbean Resturant & Bakery	, Inc.			
(Name o	of Corporation as current	ly filed with the Florida Dept. of Sta	<u>te</u> )	
P18000082590				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the	e following a	umendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			7	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association,"	Torp," "Inc," or "Co".	A professional corporation name mu		
(Principal office address MUST BE A S				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	i <u>c</u> able: OFFIC 2000		SELLANDO SELLANDO	19 00 0 1
n - Promouding the registered agent an	d/or registered office add	ress in Florida, enter the name of th	<u>e</u>	= T1
Name of New Registered Agent	Vincent Gallimore		•	ਜ਼ ਘ
State of New Registered Agent	3151 Nathaniel Trace			2
	(Florida st	reet address)		
New Registered Office Address:	Tallahassee	. Florida	32311	
	-	(City)	(Zip Coc	de)
New Registered Office Address:  New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	 t:	a(Zip Cod	-le)

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.

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Р	Vincent Gallimore	3151 Nathaniel Trace
X Add			Tallahassee, FL 32311
Remove			
2) X Change	PTD	Leslie-Ann Gallimore	5532 Hampton Woods Way
Add			Tallahassee, FL 32311 5
Remove 3) Change			
Add		<del>.</del>	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. <u>If amending or addi</u> (Attach additional sho		onal Articles, enter change(s) here: ressury). (Be specific)	

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	** = /	:	
(if not applicable, indicate N/A)			
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Page 3 of 4			
The date of each amendment(s) adoption:		it otha	r than t
date this document was signed.		ouic	r utati li
Effective date <u>if applicable</u> :			_

(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 as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted b by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amendment(s) it for approval.			
	by the shareholders through voting groups. The following statement ofting group entitled to vote separately on the amendment(s):			
	amendment(s) was/were sufficient for approval			
by	(voting group)			
	y the board of directors without shareholder action and shareholder			
The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder			
Dated	019			
selected, by a	president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court deciary by that fiduciary)			
Vince	nt Gallimore			
	(Typed or printed name of person signing)			-
Presid	dent			
(Title e	of person signing)			-
			19 DEC 11	
		•	PH 4:	: 1