## P 19 00000 3037

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

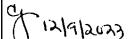




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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ADRIAN'S REST.	AURANT, INC.	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	PATRICK VILLAGOMEZ		
,		Name of Contact Person	1
-		Firm/ Company	<del></del>
	4619 POINCIANA ST, #1		
•		Address	
	LAUDERDALE-BY-THE-S	EA, FL 33308	
•		City/ State and Zip Code	
	qiulia.Zum	10 DO G G mail.	com
	E-mail address; (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
PATRICK VILLAGO	MEZ	at ( 703	887-9959
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check 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)	□\$52.50 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		Amend Divisio The Co	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

10 to 10 to 10 to

of

ADRIAN'S RESTAUARNT, INC.	2822 11611 0 1 2011 1 5
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P19000003037	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	W/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent N/A	
(Florida s	street address)
New Registered Office Address: V/A	, Florida
	(City) (Zip Code)
New Registered Office Address: PTT  New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	(City) (Zip Code)
Signature of New	Registered Agent, if changing
Check if applicable	
стек а аррисали	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	PATRICK VILLAGOMEZ	4619 POINCIANA ST
X Add			UNIT I
Remove			LAUDERDALE BY THE SEA.
2) Change			FL, 33308
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

	eets, if necessary).	(Bc specific)			
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If an amendment pr	ovides for an exch	ange, reclassificat	tion, or cancellat	ion of issued shar	<u>es.</u>
provisions for impl	ementing the ame le, indicate N/A)	nament it not con	tained in the am	enament itseit:	
<b>A</b>	.,				
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The date of each amendment(s) ad	11-14-2023  option:, if other tha
date this document was signed.  11-14  Effective date if applicable:	-2023
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed a partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopy by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
11-14-2023 Dated	
Signature <u>(()</u>	Da Grama
selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
(	GIULIA UMANA
-	(Typed or printed name of person signing)
I	RESIDENT + TREASURER
-	(Title of person signing)

thc

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