## P1900009787

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R. WHITE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Positano Pizzeria	a, Inc.	
DOCUMENT NUMBER:PI	9000009787		
The enclosed Articles of Amend	ment and fee are su	abmitted for filing.	
Please return all correspondence	concerning this ma	itter to the following:	
		Salvatore Mandara	
<del></del>		Name of Contact Person	1
	n <sub>e</sub>	ositano Pir selo, Inc	
		Firm/ Company	
	2	204 N. Woodland Blvd.	
		Address	
		Deland, FL 32720	
<del></del>	<del></del>	City/ State and Zip Cod	e
	Salvatore.man	dara@gmail.com	
E-ma	il address: (to be u	sed for future annual report	notification)
For further information concerni	ng this matter, pleas	se call:	
Salvatore Mandara		at ( <u>407</u>	529-7749
Name of Contact	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:
•	3.75 Filing Fee & rtificate 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 Addr Amendment Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Articles of Incorporati of FILED

Postitano Pizzeria, Inc. (Name of Corporation as currently filed with the Florida Dept. for State) P19000009787 (Document Number of Corporation ( Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Salvatore Mandara Name of New Registered Agent 204 N. Woodland Blvd. (Florida street address) Deland New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Solution Mediate 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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	CEO	Rafael Cuevas	204 N. Woodland Blvd.
Add X Remove			Deland, FL 32720
2) Change			
Add			
3) Change			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
6) Change			
Add Remove			

Attach additional sheets	additional Articles, enter change(s) here: if necessary). (Be specific)	
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	a e la legat de la Nada	e Circus d'alcons
<u>r an amendment provi</u> provisions for implem	des for an exchange, reclassification, or cancellation enting the amendment if not contained in the amend	ment itself.
(if not applicable,	ndicate N/A)	ment haen.
() <b></b>	······································	
	<del></del>	

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(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 dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	)
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	•
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Februar Dated	y 22, 2019	
Signature Sel	Pule Min (P)	
(By a di selected	rector, 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 ed fiduciary by that fiduciary)	
	Salvatore Mandara	
-	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	