P2000035477

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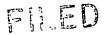
2021 HAR 12 PH 3: 17
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: MEGRIL JAMAIC	AN RESTAURANT2, INC	· -		
DOCUMENT NUN	D200000025477				
The enclosed <i>Article</i>	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	PHILLPPA J. MYERS				
	Name of Contact Person				
	Firm/ Company				
	6396 DAYSBROOK DRIVE	APT 102			
		Address			
	ORLANDO, FL 32835				
ς		City/ State and Zip Code	2		
	<u> </u>	sed for future annual report	notili ooti oo		
	E-mail address: (to be us	sed for future annual report	nonneation)		
For further informati	ion concerning this matter, pleas	se call:			
Name	e of Contact Person	at (at () de & Daytime Telephone Number		
Name	e of 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:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		
Tananassee, 142,32314		Tallahaccon FL 32303			

Articles of Amendment to Articles of Incorporation of



NEGRIL JAMAICAN RESTAURANT2, INC. (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE P20000035477 (Document Number of Corporation (if known) 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: FLAVORS OF JAMAICA-2, INC. The new 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." N/A -B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) REMAIN SAME AS ON FILE C. Enter new mailing address, if applicable: N/A -(Mailing address <u>MAY BE A POST OFFI</u>CE BOX) REMAIN SAME AS ON FILE ς 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: N/A -Name of New Registered Agent REMAIN SAME AS ON FILE (Florida street address) N/A - REMAIN SAME AS ON FILE , Florida, New Registered Office Address: (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 the obligations of the position Signature of New Registered Agent, if changing

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Check if applicable

☐ 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 = Fresident; 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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change X Add		<u> </u>	
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
- — Add Remove			
-			
6) Change	-		
4 dd			•
Remove			•

E. If amending or adding additional Article (Attach additional sheets, if necessary).	les, enter change(s) here:
N/A	(he specy)
N/A	
<u> </u>	
	
<u></u>	
3	
	·
F. If an amendment provides for an excha	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amend (if not applicable, indicate N/A)	dment if not contained in the amendment itself:
,	
N/A 3	
	

		02/18/2021	
The date of each am		option:	, if other than th
ate this document w	-		
Effective date <u>if app</u>		1/2021	
meetive date maps	<u></u>	(no more than 90 days after amendi	nent file date)
		ock does not meet the applicable statutory filing partment of State's records.	g requirements, this date will not be listed as th
Adoption of Amend	ment(s)	(<u>CHECK ONE</u>)	
The aniendment(s action was not req		oted by the incorporators, or board of directors w	ithout shareholder action and shareholder
		oted by the shareholders. The number of votes conficient for approval.	ast for the amendment(s)
☐ The amendment(s must be separate.	i) was/were app Iy provided for a	roved by the shareholders through voting groups each voting group entitled to vote separately on t	. The following statement the amendment(s):
"The numbe	er of votes cast t	or the amendment(s) was/were sufficient for app	roval
bv			**
		(voting group)	
₹ Da	02/ 18 /2021 ited		
Sig	gnature	huppa Mes	
	selected	rector, president or other officer – if directors or , by an incorporator – if in the hands of a receive ed fiduciary by that fiduciary)	
		PHILLIPPA J. MYERS	
		(Typed or printed name of person sign	ning)
,		PRESIDENT	

(Title of person signing)

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