P210000 26100

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





400371283254

08/09/21--01024--018 **35.00

R \VH'TE SEP 1 , 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Bar 5 Lounge Inc		
	UMBER: P21000026100		
	icles of Amendment and fee are su	bmitted for filing.	
Please return all c	orrespondence concerning this ma	tter to the following:	
	Jennifer Yon		
		Name of Contact Person	n
	Bar 5 Lounge & Grill		
		Firm/ Company	
	5401 S. Kirkman Road Suite	201	
		Address	
	Orlando, Florida 32819		
		City/ State and Zip Cod	e
	Msjyon79@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call:	
Jennifer Yon		at (486- 0993
Na	une of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fe	e S43.75 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 Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303



Division of Corporations

nad in ED

28 SEP -7 PM 3: 44

August 19, 2021

JENNIFER YON 5401 S KIRKMAN RD STE 201 ORLANDO, FL 32819

SUBJECT: BAR 5 LOUNGE INC Ref. Number: P21000026100

We have received your document for BAR 5 LOUNGE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

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.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 821A00019914

Articles of Amendment to Articles of Incorporation of

Bar 5 Lounge Inc		÷ 1	-7
(Name of Corporat	ion as currently filed w	ith the Florida Dept.	f State)
P21000026100			
(Docu	ment Number of Corpora	tion (if known)	
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this <i>Florida F</i>	Profit Corporation ado	ts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	," or "Co". A professi	" or "incorporated" or ional corporation nam	The new the abbreviation "Corp.," the must contain the word
B. Enter new principal office address, if applicable	e:		
(Principal office address <u>MUST BE A STREET AD</u>			
			1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BE	<u></u>		
D. If amending the registered agent and/or registered new registered agent and/or the new registered		orida, enter the name	of the
Name of New Registered Agent			
	(Florida street address	.)	<u> </u>
New Registered Office Address:		r	l lorida
New Registered Cyfice Address.	(City)	, г	(Zip Code)
New Registered Agent's Signature, if changing Re	sistered Agent:		
I hereby accept the appointment as registered agent.		ccept the obligations o	f the position.
Sign	ature of New Registered 2	Agent, if changing	<u>- </u>
	, ,	, , , , , , , , , , , , , , , , , ,	
Check if applicable The amendment(s) is/are being filed pursuant to s	607 0120 (11) (a) F.S		

address of each Officer (Attach additional sheets, Please note the officer/di. P = President; V = Vice Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones lead Mike Jones, V as Remove	and/or E , if necess rector titl President = Chief F rector wo l in the fo wes the c	sary) be by the first letter of the office title: to T = Treasurer; S = Secretary; D = Director; inancial Officer. If an officer/director holds mould be PTD. Illowing manner. Currently John Doe is listed orporation, Sally Smith is named the V and S.	TR= Trustee; C = C ore than one title, list as the PST and Mike	Chairman or Clerk; CEO = Chief the first letter of each office held. I Jones is listed as the V. There is
Example: X_Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	MGR	Latisha Robinson	1882 Snapd	ragon Ct.
Add			Apopka, FL	32703
X Remove				
2) Change				
Add			***************************************	
Remove 3) Change			_	
Add				
Remove				
4) Change			_	
Add				
Remove				
5) Change	 			<u> </u>
Add				
Remove				

6) ____ Change

_____ Add

__ Remove

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	, <u></u> -
	<u> </u>
	<u> </u>
	<u> </u>
f 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)	
	
	1
	
	<u> </u>

March 25, 2021	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	,
-	
March 25, 2021	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Nicker 16 des des immediations in this block decreases and the transfer of the	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sharehold action was not required.	er action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s must be separately provided for each voting group entitled to vote separately on the amendment(s)	talement):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	}
June 12, 2021 Dated Signature (By a di detor, president or other officer – if directors or officers have not selected by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary) Jennifer Yon (Typed or printed name of person signing) President	
President	
(Title of person signing)	i