P21000044273

| (Red | questor's Name) | |
|---------------------------|-------------------|--|
| (Add | dress) | |
| (Add | dress) | |
| (City | //State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | siness Entity Nar | ne) |
| (Doc | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | Filing Officer: | |
| | | |
| | | |
| | | |
| | | <u>. </u> |

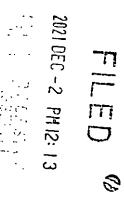
Office Use Only



800371280248

12/08/21--01013--019 **13.75

08/23/21~-01010+-009 ++30.00



C. BRUMBLEY
DEC - 9 2021

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: <u>MiCHOC</u> | ITH FRITANG | A & GRILL IHC. |
|--------------------------|--|--|---|
| DOCUMENT NUME | BER: <u>P2/0000</u> | 44273 | A & GRILL INC. |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | MINIA I | IALTER | |
| | , | /AL TER Name of Contact Person | 70715-0 20 111 10:10 |
| | 613 DESOTO | Firm/ Company A Ve | |
| | LEHIGH ACTE | | 33971 |
| | | ed for future annual report | • |
| For further information | n concerning this matter, pleas | se call: | |
| DUSTIN G | OLLOPP | at (786 |) 560 - 7496 de & Daytime Telephone Number |
| Name c | of Contact Person | Area Coo | 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) |
| Ame Divi P.O. | ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314 | Amend Divisio The Ce | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 |

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation

of

| MI CHOCITA FRITANICY | A & GRILL INC |
|---|--|
| | |
| P2100001 | 44273 umber of Corporation (if known) |
| (Document Nu | umber of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation: | tes, this Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporate | tion: |
| name must be distinguishable and contain the word "corporat" "Inc.," or Co.," or the designation "Corp," "Inc," or "Chartered," "professional association," or the abbreviation | tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS | N/A |
| | 2021 D |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | EC -2 |
| | 55 PR TT V V V V V V V V V V V V V V V V V V |
| D. If amending the registered agent and/or registered offi | |
| new registered agent and/or the new registered office : Name of New Registered Agent NAME of New Registered Agent | address: |
| · | |
| (Flo | lorida street address) |
| New Registered Office Address: | . Florida |
| | (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa | |
| Signature of | f New Registered Agent, if changing |
| Chack if annlicable | |

 \square 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 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.

| X Change | PT John | <u>ı Doe</u> | |
|-------------------------------|------------------------|----------------|-------------------|
| X Remove | <u>V</u> <u>Mik</u> | e Jones | |
| X Add | <u>SV</u> <u>Sally</u> | y Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | MGR | DUSTIN GOLLOPP | 613 DESOTO AVE |
| Add Remove | | | LEHIGO ACRES, Fl. |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Ar (Attach additional sheets, if necessary). | (Be specific) | Lagrica L | | |
|---|---------------------|----------------------|----------------------|----------|
| N/A | | | | |
| _// | | | • | |
| | | | | |
| | | | | |
| | | | | |
| W- 1- 1 | | | | _ |
| <u></u> . | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | ,, , , | |
| | | | | |
| | | - | | · |
| | | | | <u> </u> |
| | | | | |
| If an amendment provides for an exc | hange, reclassifica | tion, or cancellatio | on of issued shares, | |
| provisions for implementing the am (if not applicable, indicate N/A) | endment if not con | tained in the ame | ndment itself: | |
| | | | | |
| N/A | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | - | | |
| | | | | |

| The date of each amendment(s) adoption: | | , if other than the |
|---|--|--|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file o | date) |
| Note: If the date inserted in this block does document's effective date on the Department | s not meet the applicable statutory filing require of State's records. | ments, this date will not be listed as the |
| Adoption of Amendment(s) (9 | CHECK ONE) | |
| The amendment(s) was/were adopted by t action was not required. | he incorporators, or board of directors without sh | areholder action and shareholder |
| ☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for | he shareholders. The number of votes cast for the or approval. | e amendment(s) |
| | the shareholders through voting groups. The folling group entitled to vote separately on the amend | |
| "The number of votes cast for the ar | mendment(s) was/were sufficient for approval | |
| by DUSTIN GOLL | opp | |
| (1 | voting group) | |
| appointed fiduci | resident or other officer - if directors or officers hands of a receiver, trustee ary by that fiduciary) The Gollope (Typed or printed name of person signing) | ave not been , or other court |
| | (Typed or printed name of person signing) | |
| / | MGR | |
| | UGR (Title of person signing) | |