From: Inaissa Quinones

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TPBS CORP Account Number : I20190000112 Phone : (786)389-2779 Fax Number : (305)356-3688

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE FAMILY PIZZA SHOP INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
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Help

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

From: Inaissa Quinones

Articles of Amendment to Articles of Incorporation of

| THE FAMILY PIZZA SHOP INC | | | |
|---|------------------------------|---|----------------------------|
| (Name of Corporation as curr | en <u>tly filed with the</u> | Florida Dept. of State) | |
| P24000032675 | | | |
| (Document Numb | er of Corporation (i | f known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation: | his <i>Florida Profit</i> (| Corporation adopts the followi | ng amendment(s) |
| A. If amending name, enter the new name of the corporation | <u>:</u> | | |
| | | | 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 professional | incorporated" or the abbreviat corporation name must conto | ion "Corp" tin the word |
| 3. Enter new principal office address, if applicable: | | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| | | · | |
| | | | |
| | | | |
| If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr | | enter the name of the | |
| Name of New Registered Agent | | | _ |
| | | | |
| (floride | i street address) | | _ |
| New Registered Office Address; | | , Florida | |
| | (Ciņ) | (Zip | Code) |
| New Registered Agent's Signature, if changing Registered Agenes hereby accept the appointment as registered agent. I am famili | ent: ar with and accept | the obligations of the position. | |
| Signature of Nev | v Registered Agent | , if changing | _ |
| | - 6 6 | r v mer e | |
| heck if applicable | | | |

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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 | <u>Addres</u> s |
| 1) Change | S | MAYTEE VALENCIA | 15196 SW 184 ST |
| Add | | | MIAMI, FL 33187 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | <u> </u> |
| Add | | | |
| Remove | | | |
| 4) Change | | *************************************** | · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| Remove | | | <u> </u> |
| 5) Change | | | · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

To: FL DEPT OF STATE

| 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/4) | inding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific) | |
|---|---|---|
| provisions for implementing the amendment if not contained in the amendment itself: | additional sneets, a necessary, — (De specific) | |
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| provisions for implementing the amendment if not contained in the amendment itself: | mendment provides for an exchange, reclassification, or cancellation of issued shares, | |
| (if not applicable, indicate N/A) | sions for implementing the amendment if not contained in the amendment itself: | |
| | f not applicable, indicate N/A) | |
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| The date of each amendment(| s) adoption: | , if other than the |
|--|---|--|
| date this document was signed. | | |
| Effective date if applicable: | (no more than 90 days after amendment file dat | |
| | (no more than 90 days after amendment file dat | e) |
| Note: If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filing requireme Department of State's records. | nts, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were action was not required. | adopted by the incorporators, or board of directors without share | holder action and shareholder |
| ☐ The amendment(s) was/were by the shareholders was/wei | adopted by the shareholders. The number of votes east for the are sufficient for approval. | nendment(s) |
| | approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendment | |
| "The number of votes of | east for the amendment(s) was/were sufficient for approval | |
| by | | |
| 0, <u></u> | (voting group) | |
| 11/09/2 Dated | | |
| Signature | Bogue | |
| selo | a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary) | |
| | CLAUDIA PALMA ROQUE | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |