## H1657 LAZĀRUS CORPORĀTE INDUSTRĪES, OT MAYOR PARTY OF ST Requestor's Name 890 S.W. 87 AVENUE, SUITE: 16 Address MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 2. (Corporation Name) (Document #) 200002307672--0 03/30/97--01040--029 \*\*\*\*\*\*35,00 \*\*\*\*\*\*\*35.00 (Corporation Name) (Document #) 4. (Corporation Name) (Document #) Pick up time \_\_\_\_\_\_ Certified Copy Walk in Certificate of Status □ Photocopy Mail out ☐ Will wait AMENDMENTS NEW FUINGS Amendment Profit Resignation of R.A., Officer/ Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other OTHER FILINGS ÖÜÄLIFICATION Annual Report Foreign **Fictitious Name** Limited Partnership Name Reservation Reinstatement Trademark

Examiner's Initials
C222031(1/95)

Other



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 1, 1997

**LAZARUS** 

MIAMI, FL

SUBJECT: IL PASTAIO, INC. Ref. Number: P94000041659

We have received your document for IL PASTAIO, 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):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 1997 annual report. The corporation must be reinstated before this document can be filed.

The total amount due to reinstate is \$750.00.

Your document must be typed or printed LEGIBLY. We are unable to decipher many of the words and numbers in this document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 487-6957.

Joy Moon-French Corporate Specialist

Letter Number: 497A00048266

|  | RPORATE INDUSTRIES, INC. Requestor's Name 7 AVENUE, SUITE: 16 Address   |  |
|--|---|--|
| LOCAL REPR   | ORIDA 33174 (305)552-5973 Ite/Zip Phone # ESENTATIVE TALLAHASSEE  | Office Use Only  |
| 1  | Orporation Name)  ON NAME(S) & DOCUMENT NUM  Outporation Name)  (D)   | ocument #)   |
| 3(C  | orporation Name) (De  | ocument #)   |
| Walk in Mail out                                       | Pick up time Photocopy  | ☐ Certified Copy ☐ Certificate of Status   |
| Profit NonProfit Limited Liability Domestication Other | AMENDMENTS  Amendment  Resignation of R.A., Officer/ Direct  Change of Registered Agent  Dissolution/Withdrawal  Merger | The Check Est I  |
| Annual Report Fictitious Name Name Reservation         | Foreign Limited Partnership Reinstatement Trademark Other   | NOV 25 AM III: 10 STOP CORPORATIONS  AND STATE OF STATE  AND STATE  AN |

CRI E031(1/95)

Examiner's Initials

## AKTICLES OF AMENDMENT

## TO AKTICLES OF INCORPORATION

OF

IL PASTAIO INC.

11500 Biscayne Boulevard, N. Miami

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of omershment to its articles of incorporation:

FIRST:

Amendment(s) adopted: (indicate anicle number(s) being amended, added or deleted)

Amendment to the article VIII Of the Article of Incorporation:

This Corporation shall have one director. The number of directors may be either increased or decreased from time to time by the bylaws.

The name and address of the director is:

Giulio DI STRAVOLA 201-190th Street N. Miami Beach FL 33160 ...

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shales, provisions for implementing the amendment if not contained in the amendment liself, are as follows:

| THIRD: The date of each amendment's adoption: 11/01/1997  |
|---|
| FOURTH: Adoption of Amendment(s) (check one)  |
| The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval. |
| The amendment(s) was/were approved by the shareholders through voting groups.   |
| The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):              |
| "The number of votes cast for the amendment(s) was/were sufficient for approval by (voting group)                                       |
| The amendment(s) was/we lopted by the board of directors without shareholder action and shareholder action was not required.            |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.              |
| Signed this 5 day of november 19 97  Signature  |
| Giulio Di Stravola  |
| Typed or printed name   |
| PRESIDENT   |
| Tive  |

care of the section was a feet and a section of the section of the