

P940000073684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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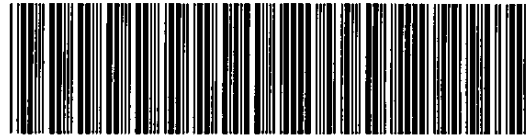
(Business Entity Name)

(Document Number)

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07/17/06--01024--004 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 24 AM 11:19

Amend
@ 8.24.06

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SAL'S PIZZERIA ITALIAN CAFE, INC.

DOCUMENT NUMBER: P94000073684

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SALVATORE LA COGNATA
(Name of Contact Person)

SAL'S PIZZERIA ITALIAN CAFE, INC.
(Firm/ Company)

6903 NAVARRE PKWY (HWY. 98)
(Address)

NAVARRE, FL 32566
(City/ State and Zip Code)

For further information concerning this matter, please call:

SALVATORE LA COGNATA at (850) 936-8240
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2006

SALVATORE LACOGNATA
SAL'S PIZZERIA ITALIAN CAFE', INC.
6903 HIGHWAY 98
NAVARRE, FL 32566

SUBJECT: SAL'S PIZZERIA ITALIAN CAFE', INC.
Ref. Number: P94000073684

We have received your document for SAL'S PIZZERIA ITALIAN CAFE', 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 date of adoption of each amendment must be included in the document.

The officer signing the document title is listed as (DIRECTOR) please type/print this title on the space provided instead of (Owner).

The registered agent address is already 6903 Navarre Pkwy - Hwy 98 Navaree, Fl 32566 please remove this from the document.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 406A00050308



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 25, 2006

SALVATORE LACOGNATA
SAL'S PIZZERIA ITALIAN CAFE', INC.
6903 HIGHWAY 98
NAVARRE, FL 32566

SUBJECT: SAL'S PIZZERIA ITALIAN CAFE', INC.
Ref. Number: P94000073684

We have received your document for SAL'S PIZZERIA ITALIAN CAFE', 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

The registered agent address change was made on the 2006 annual report filed on July 19, 2006.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 906A00047106

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 24 AM 11:19

Articles of Amendment
to
Articles of Incorporation
of

SAL'S PIZZERIA ITALIAN CAFE, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P 94000073684

(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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

→ ADDRESS - 6903 HWY 99

→ SHOULD BE: 6903 NAVARRE PKWY (HWY 98)

REGISTERED AGENT ADDRESS - 128 S. PALAFOX ST.
PENSACOLA, FL 32501

→ SHOULD BE: 6903 NAVARRE PKWY (HWY 98)
NAVARRE, FL 32566-7468

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

ALL ADDRESS SHOULD BE

The date of each amendment(s) adoption: 07-15-06

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

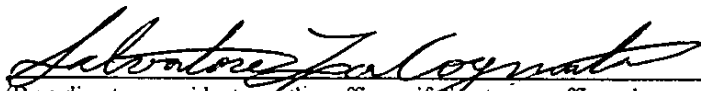
- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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/were adopted 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.

Signature



(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)

SALVATORE LACOGNATA

(Typed or printed name of person signing)

~~OWNER~~ Director

(Title of person signing)

FILING FEE: \$35