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DIVISION OF CONFERNMENT OF STATE OF STA

AUG 2 5 2021

R. HUNT

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:  DOCUMENT NUMBER: Ref.  The enclosed Articles of Amendment and for	The Red GATOR CAFE Co. Number P95000049,513  The Red GATOR CAFE Co.  Number P95000049,513
Please return all correspondence concerning	
Mailing address:	Name of Contact Person  Red. GATOT Ca Fe Co.,  Firm/ Company  6 Ed, 4h Lane  Address  PAIM COAST FL 3 2/64  City/ State and Zip Code  (to be used for future annual report notification)
For further information concerning this mat	ter, please call: 08/03/31+-9/9/9/41/9/4 **50.09
PATRICIA A CUY Name of Contact Person	164 at (386) 864-5547 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt made payable to the Florida Department of State;
\$35 Filing Fee	
Mailing Address Amendment Section Division of Corporations P.O. Boy 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Ai	nendment		
to Articles of Inco	ornoration		
Articles of file			
The Del Con-			
THE REC GAT	OL CAPE CO.		
(Name of Corporation as currently	y filed with the Florida Dept. of State)		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following	; amendn	nent(s)
A. If amending name, enter the new name of the corporation:	· / / /		
	NA	The ne	••••
name must be distinguishable and contain the word "corporation," "c	commons " or "incorporated" or the abbreviatio	•	
"Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A	professional corporation name must contain	the wor	rd
"chartered." "professional association," or the abbreviation "P.A."	<i>p,, .,</i>		
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NIA		
	,		,
	$\cdot$ , , $\wedge$		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	$\wedge / / \uparrow \wedge$		
(Maning and Cos SECTION ACTION FOR THE DO.)		£3	<b>C</b> 3
		<u> </u>	
		AU	<u> </u>
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the	6	£
new registered agent and/or the new registered office address:		· ;	2.7
	N// A	Š	). (C)
Name of New Registered Agent	_//		
	1	7	7.5
(Florida stre			
New Registered Office Address:	. Florida		
	(City) (Zip C	ode)	•
New Registered Agent's Signature, if changing Registered Agent:			
Thereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.		
1 1	ÍΛ		
$\sim$	T .		
Signature of New Re	egistered Agent, if changing		

Check if applicable  $\square$  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 Doc 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	PT Jol	hn Doc	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)  1) Change Add	<u>Title</u>	Saman Ha K. Nova K	Address  67 Sentine/Train  PALM COAST  FL  32164
Add Remove 4) Change Add Remove			
5) Change			
Remove 6) Change Add			
Remove			

	<mark>ling additional Articles, c</mark> heets, if necessary). — (Be		<u>v</u> .		
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If an amendment	provides for an exchange,	reclassification, o	r cancellation of issu	ed shares,	
(if not applied	olementing the amendme ble, indicate N/A)	nt ii not contained	in the amendment i	iseir.	
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The date of each amendment(s) adoption:	8-16-21	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment	Blu datas
	tho more than 90 days after amenament	jne aaie)
Note: If the date inserted in this block document's effective date on the Departmen		quirements, this date will not be listed as the
Adoption of Amendment(s) (	(CHECK ONE)	
The amendment(s) was were adopted by action was not required.	the incorporators, or board of directors witho	ut shareholder action and shareholder
CI The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast f for approval.	or the amendment(s)
	y the shareholders through voting groups. The ting group entitled to vote separately on the a	
"The number of votes cast for the a	imendment(s) was/were sufficient for approve	ıl
by	<u>_</u>	_,"
by	(voting group)	
DatedSignature	-16.21 cas W. Curley	Galrecia O Curlay
(By a director, p selected, by an	president or other officer – if directors or offic incorporator – if in the hands of a receiver, tr giary by that fiduciary)	ers have not been
_ 7h	OMAS W. CUPLEY (Typed or printed name of person signing	PATRICIA A. Curkex
£	(PSIDENT (Title of person signing)	V. Presiden T
	(The or person agains)	Treasurer