## P95000056685

(Requestor's Name)
(Address)
(Address)
(riddless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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SECRETARY OF STATE

FER 1 5 2016 T. LEMIEUX



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Hot Sobe LTD.	20.	100° 50° - 100° 100° 100° 100° 100° 100° 100°
DOCUMENT NUMB	ER:P95000056685		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	Graziano La Grasta		
-		Name of Contact Perso	n
•		Firm/ Company	
	1125 West Ave. #3		
•		Address	
	Miami Beach, FL 33139		
-		City/ State and Zip Cod	le
felpett	i@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Graziano La Grasta		at (	525-6063
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327		Ameno Divisio	Address  Iment Section on of Corporations Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

	to Articles of Incorporation	
11.6.	of	
Hot Sol	se LID. (0.	
(Name of Corpor	ation as currently filed with the Fl	orida Dept. of State)
(Doc	cument Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florts Articles of Incorporation:	rida Statutes, this Florida Profit Cor	poration adopts the following amendment(s) t
A. If amending name, enter the new name of the	corporation:	
Grafa Pizza & Pasta Co.		The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A profession	
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>	<u>DDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
, , , , , , , , , , , , , , , , , , , ,		
D. If amending the registered agent and/or registered new registered agent and/or the new register		ter the name of the
Name of New Registered Agent	<del></del>	<del></del>
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing F	Pagistared Agent:	
hereby accept the appointment as registered agen		obligations of the position.

Signature of New Registered Agent, if changing

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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
_X Add	<u>\$V</u>	Sally Sn	uith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		~
Add				
Remove				
2) Change		_	· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
3)Change		_		
Add				
Remove	,			
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add				
Remove				

[famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · ·	
· · · ·	
, 100	
· · · · · · · · · · · · · · · · · · ·	
f an amandmant provider for an arch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.	0147	
Effective date if applicable:	01/17	
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were sufficient for approval	,
by	"	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
01/2	0/17	
DatedSignature	If Hand	
	rector president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Graziano La Grasta	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	