P900000015931

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





400320654234

11/13/18--01037--001 **35.60

FILEU STORING 13 PM 3: 14

Mamechs

NOV 1 5 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GEORGIO'S	BAKERY MARKET, IN	C		
DOCUMENT NUMBER: P96000075931				
The enclosed Articles of Amendment and fee a	are submitted for filing.			
Please return all correspondence concerning th	is matter to the following:			
Sophia Theodore				
	Name of Contact	Person		
Taverna Opa Corporate				
	Firm/ Compa	ny		
800 N. Ocean Drive, 2n	d Floor			
	Address			
Hollywood, Florida 336)19			
	City/ State and Zi	p Code		
sophia@tavernaoparestaurant.	.com			
· · · · · · · · · · · · · · · · · · ·	be used for future annual	report notification)		
For further information concerning this matter,	please call:			
Patty Maher	954 at (341-6265 x 0		
Name of Contact Person	A	rea Code & Daytime Telephone Number		
Enclosed is a check for the following amount n	nade payable to the Florid	a Department of State:		
S35 Filing Fee S43.75 Filing Fee Certificate of State	_	Certificate of Status		
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

Articles of Amendment to Articles of Incorporation of

GEORGIO'S BAKERY MARKET, INC.

CEORGIOS BAKERT MARKET, INC.	
(Name of Corporatio	n as currently filed with the Florida Dept. of State)
P96000075931	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
GIORGIO'S BAKERY MARKET, INC.	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registered	
new registered agent and/or the new registered o	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
	am familiar with and accept the obligations of the position.
Signa	ture 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 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	<u>PT</u>	John Do	r.	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add		_		
Remove				
4) Change	-	_		
Add				
Remove				
51 Change		-		
Add				
Remove				
C				
6) Change		_		
Add				
Remove				

Attach additional s	ding additional Artic heets, if necessary).	(Be specific)	eist neve.			
- -						
				 -		
			•			
	<u> </u>					
			·			
<u>-</u>						
						
_			-			
						
				- · · · ·		
	···				_	
			•		· · · · · · · · · · · · · · · · · · ·	
If an amendment r	provides for an exch	ange reclassific	ation or cancel	llation of issued a	churac	
provisions for im	plementing the amer	dment if not co	ntained in the a	mendment itself	:	
(if not applica	ble, indicate N/A)				_	
·						
-						
						-
				-		
	· 					
· 						

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendr sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following store each voting group entitled to vote separately on the amendment(s)	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and share	rholder
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and sharehold	ег
10/30/20 Dated Signature	Potest Surpress	
selec	a director, president or other officer – if directors or officers have not eted, by an incorporator – if in the hands of a receiver, trustee, or other binted fiduciary by that fiduciary)	
	PETER TSIALIAMANIS	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	