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To:

Division of Corporations

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Alln: Lavissak Lincoln

Account Number : Phone

Fax Number (561) 842-4104

BASIC AMENDMENT

LJL FOOD MANAGEMENT, INC.

Certificate of Status	0
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Page Count	03
Estimated Charge	\$35.00

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12/9/2005

10,15,00

COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LJL FOOD M	ANAGMENT, INC.				
DOCUMENT NUMBER: F97000040868					
The enclosed Articles of Amendment and fee are	e submitted for filing.				
Please return all correspondence concerning this	matter to the following:	-a •			
Larissa K. Lincoln		4			
(Name of	Contact Person)				
COHEN, NORRIS, SCHER	ER, WEINBERGER & 1	WOLMER			
(Firm	/ Company)				
712 U.S. HIGHWAY ONE, STE		<u></u>			
<i>a</i>	Address)				
NORTH PALM BEACH, FL 33408					
(City/ State	te and Zip Code)				
For further information concerning this matter, p	lease call:				
LARISSA K. LINCOLN	at (561) 844.360	o_			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:		٠			
☑ \$35 Piling Fee	☐ \$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 Cir Tallahassee, FL 32301	role			

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Articles of Amendment to Articles of Incorporation of

LIL FOOD MANAGEMENT, INC.

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

P97000040668

(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," "cor	npany," or "incorporated" of	the abbreviation "Corp.," "Ir	1c.," or "Co.")
(A professional corporation must contain ti	ie word "chartered", "profes	sional association," or the abi	oreviation "P.A."}

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

he nev	Registered	Agent	ís:	HELEN	BIKOS,		HIGHWALM BEAU	 SME 400,
			_		·	HORIH P.	ALTI BEAL	
		· <u>-</u>					····	
<u>-</u>							,	 <u></u>
			`			s if necessar		
	endment providence and the state of the stat							

(continued)

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	(((H0500028276 3)))
The date o	of each amendment(s) adoption: OCTOBER 18, 2005
Effective d	late 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)
	HELEN BIKOS
	(Typed or printed name of person signing)
	DIRECTOR/SECRETARY
	(Title of person cioning)

FILING FEE: \$35

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