

P99000008107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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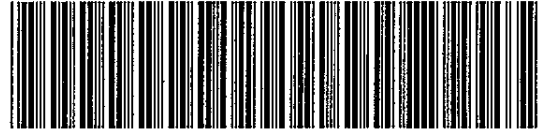
(Business Entity Name)

(Document Number)

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08/20/04--01039--008 **35.00

FILED
04 AUG 20 AM 10:10
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Amended
MD 8/26

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HUBBARD'S CUPBOARD, INC.
DOCUMENT NUMBER: P99000008107

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

Please return all correspondence concerning this matter to the following:

ROBERT HUBBARD
(Name of Contact Person)
HUBBARD'S CUPBOARD
(Firm/ Company)
7114 SW 117 AVE MIAMI
(Address)
MIAMI FL 33183
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

ROBERT HUBBARD at (305) 270 6997
(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
409 E. Gaines Street
Tallahassee, FL 32399

FILED

04 AUG 20 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

HUBBARD'S CUPBOARD, INC.

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

P99000000 8107

(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)**

D TO BE DELETED OFFICER/DIRECTOR DETAIL
ELIZABETH J HUBBARD 10461 SW 115th ST
MIAMI FL 33176

REPLACED BY OFFICER/DIRECTOR DETAIL
ROBERT L HUBBARD 14971 EGGAN LANE
MIAMI LAKES FL 33014

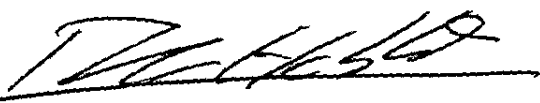
(Attach additional pages if necessary)

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)

TO BE DELETED REGISTERED AGENT
O'HARE RICHARD J
1550 MADRUBA AVE SUITE #120
CORAL GABLES FL 33146

REPLACED BY REGISTERED AGENT
ROBERT L HUBBARD
14971 EGAN LANE
MIAMI LAKES FL 33014

I STATE I AM FAMILIAR WITH OBLIGATION
OF THE POSITION OF REGISTERED
AGENT

 ROBERT L HUBBARD
8-18-04

The date of each amendment(s) adoption: JUL 29th 2004

Effective date if applicable: JUL 29th 2004

(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.

Signed this 18th day of August, 2004.

Signature [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)

ROBERT HUBBARD

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35