505033

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

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> SEP 13 2016 C MCNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	ION: GAS	P, INC.	
DOCUMENT NUMBER	:S05	033	
The enclosed Articles of A	mendment and fee are sul	bmitted for filing.	
Please return all correspon	dence concerning this mat	ter to the following:	
	GUY ARMELI		
		Name of Contact Person	
-		Firm/ Company	
	289 SE 3rd Av	e.	
		Address	
	POMPANO BEACH	FL 33060	
		City/ State and Zip Code	;
For further information co		ed for future annual report	notification)
	Guy Armeli	at (954	de & Daytime Telephone Number
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	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)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendr Divisior P.O. Bo	Address nent Section t of Corporations x 6327 ssee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

of

	CACD TNO	
/N	GASP, INC. as currently filed with the Florida Dept. of State)	A ³⁴
(Iname of Corporation a		૽ૺ
	S05033	
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Stats Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the follows	owing amendment(s)
A. If amending name, enter the new name of the corpo	ration:	
CAFFE FRATELLI ROASTERS, INC.		The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," " word "chartered," "professional association," or the abb	'Inc," or "Co". A professional corporation name n	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	w/n	
D. If amending the registered agent and/or registered	office address in Florida, enter the name of the	
new registered agent and/or the new registered offi	ce address:	
Name of Nam Projectioned Agent	N/n	
Name of New Registered Agent		
		-
·· · · · · · · · · · · · · · · · · · ·	(Florida street address)	
	, Florida	(Zip Code)

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	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/n	
Add			
Remove			4-4-4
2) Change	<u> </u>	w/a	
Add	•	·	
Remove			
3)Change		-N/n	
Add			
Remove			
4) Change		w/n	
Add			
Remove			
5) Change		N/n	
Add		,	
Remove			
6) Change		w/p	
Add		,	
Remove			

Attach addition	adding additional Articles, enter change(s) here; al sheets, if necessary). (Be specific)
	.//.^
	<i>N/11</i>
	<u> </u>
,	
<u> </u>	
<u>f an amendme</u>	ent provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself:
(if not app	licable, indicate N/A)
() 11	•
	N/ρ

The date of each amendment(s) adoption: date this document was signed.	Hugusi 25, 2016	, if other than the
Effective date if applicable:	October 1, 2016	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, thate's records.	nis date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amenda proval.	nent(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting gr	hareholders through voting groups. The following staroup entitled to vote separately on the amendment(s).	atement
"The number of votes cast for the amendr	nent(s) was/were sufficient for approval	
by	g group)	
(votn)	g group)	
☐ The amendment(s) was/were adopted by the boaction was not required.	ard of directors without shareholder action and share	holder
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and sharehold	er
Dated August 25, 2	2016	
X Signature	0 M	· · · · · · · · · · · · · · · · · · ·
	ent or other officer - if directors or officers have not be	
appointed fiduciary by	orator – if in the hands of a receiver, trustee, or other y that fiduciary)	court
GAETAN	O G. ARMELI	
***************************************	ped or printed name of person signing)	
PRESID	ENT	
	(Title of percon cigning)	