506884

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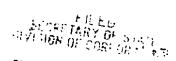


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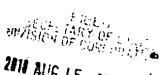
TO: Amendment Section Division of Corporations

2010 AUG 15 AM 11: 15

NAME OF CORPO	RATION: COUNTRY PIZZ	A INN, INC.	
DOCUMENT NUM	S06884		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	John K. Carter		
		Name of Contact Person	1
	CARTER REYMANN LAW	/, P.A.	
		Firm/ Company	
	9500 Koger Avenue, Ste.	112	
		Address	
	St. Petersburg, FL 33702		
		City/ State and Zip Code	
iohn	@crflalaw.com		
	_	sed for future annual report	notification)
	D Half liddress. (W ve a.	sed for facility afficial report	in the state of th
For further information	on concerning this matter, pleas	se call:	
John Carter		at (456-8970
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	riment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, Fl. 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



COUNTRY PIZZA INN, INC.

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name of the

, Florida
(Zip Code)
ion.

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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
_X Add	SV Sal	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P 	Arthur Alimonos	2805 Newbern Way
Add			Clearwater, FL 33761
X Remove			
2) Change	CFO	Angeliky Alimonos	2805 Newbern Way
Add			Clearwater, FL 33761
X Remove			
3) X Change	DPT	Bessie A. Karapateas	2461 Hidden Pine Lane
Add			Clearwater, FL 33761
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Share ownership transfereed from Arthur Alimonis to Bessie A. Karapateas	
	
	 -
F. If an amendment provides for an 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)	
See E.	
	-

The date of each amendment(s	August 10, 2018	if other than th
date this document was signed.	, advpriva:	, if officer officer of
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date we Department of State's records.	rill not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
8-10-26 Dated	D18	
Signature	Later Alemann	
$\frac{\partial \mathcal{L}}{\partial \mathcal{L}}$	a director, president or other officer – if directors or officers have not been	
sele	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Arthur Alimonos	
	(Typed or printed name of person signing)	
	Director and President	
	(Title of person signing)	

CORPORATE RESOLUTION OF SOLE DIRECTOR

The undersigned, being the sole director, sole shareholder and President of COUNTRY PIZZA INN, INC. (the "Corporation") hereby resolves to transfer his hundred percent (100%) interest of Country Pizza Inn, Inc., a for profit Florida Corporation, to Bessie A. Karapateas, his daughter, and, for the purpose hereof, the undersigned, being the sole Director, shareholder and President of the Corporation, is hereby authorized to execute on behalf of the Corporation all such conveyances, transfers and other documents of the Corporation and to do all things necessary to give effect to this resolution.

The undersigned President of the Corporation hereby certifies that:

- 1. The foregoing is a true copy of a resolution of the sole director of the Corporation adopted on August 10, 2018 and that resolution is still in full force and effect; and
- 2. The undersigned is the sole director and President of the Corporation on the date indicated below.

Dated this 10th day of August

I hereby certify there is no corporate seal.

Arthur Alimonos Arthur Alimonos	
STATE OF FLORIDA)
) ss.
COUNTY OF PINELLAS)
The foregoing instrument was acknowledged b	efore me on this August 10, 2018, by Arthur Alimonos

Notary Public State of Florida John K Carter My Commission FF 993162 Expres 05/17/2020	god ((god
7 on a Expires 05/17/2020	NOTARY PUBLIC (State of Florida)
Personally Known OR Produced Identification	ation
Type of Identification Produced: FL Dr.	ver's License