## 531218

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S. YOUNG 2020 OCT -5 PM 1: 48

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ation: Giard	Prix Pizza I	<u>h</u> C.
DOCUMENT NUMB	er: <u>5</u> 3	1218	
The enclosed Articles i	of Amendment and fee are sul	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Grance ) 009 Mian	Firm/ Company	
	E-mail address; (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Lauen	Whitle	ar ( <u>7</u> 26	de & Daytime Telephone Number
	of Contact Person		
Enclosed is a check for	r the following amount made [	payable to the Florida Dept	rtment 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)
	ling Address endment Section		Address Iment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

of	•
GIAND Prix PIZZA	trc-
(Name of Corporation as currently	filed with the Florida Dept. of State)
<u>S31218</u>	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	JA
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A Second
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	is in Florida, enter the name of the
Name of New Registered Agent	iHE
10DSS B (Florida stree	ISCAYNE BOYER VAIO
New Registered Office Address: MIAMI	Shoras Florida 33/38 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with the signature of New Registered Signature of New Registered Signature of New Registered Signature of New Registered Agent:	th and accept the obligations of the position.  While  istured 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 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.

Enganda:	we, ana sany smi	m, SV as an Add.	
Example: <u>X</u> Change	<u>PT</u> <u>John</u>	. Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	: Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PDT	Laura Whitle	10055 BISCAYNE BOULEUM
Add Remove			Marri Shores, F7 33138
2) Change	PD	Jane Dentico	10055 Bischipe Bouleinel
Add Remove			Miani Shares, Fl 33138
3) Add	<u>S</u>	Michelle Deritico	10055 BISMYNE BOULDAYO MIAMI Shoes, T-1.
Remove			33k38
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding a ttach additional sheets,	if necessary). (Be:	specific)	— 1 N(7)		
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f an amendment provid provisions for impleme	les for an exchange,	reclassification,	or cancellation o	f issued shares,	NIA
(if not applicable, in	idicate N/A)	it ii not containe	<u>a in the amenum</u>	ent usen:	1 April
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	Page 1			· · · · · · · · · · · · · · · · · · ·	
				<del></del> -	

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date if applicable:	100 more than 90 days after amendment file date	
	(nb more than 90 days after amendment file date	e)
<b>Note:</b> If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharel	holder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ar	mendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The follow, each voting group entitled to vote separately on the amendme	ing statement ent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DatedSignature	9/25/2020 Laura Waffe	
selected	rector, president or other officer – if directors or officers have , by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	other court
	Laurh White (Typed or printed name of person signing)	
	(Title of person signing)	