P13000012606

(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(Document Number)	—
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Special Instructions to Filing Officer:	
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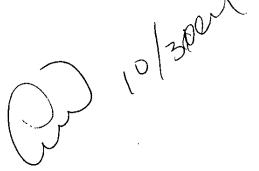
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COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: LA BELLA BER: P1300001260		RANTE, INC.
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	ANTHONY CIMI	NO	
		Name of Contact Perso	n
	LA BELLA NOTT	E RISTORANTI	E, INC.
		Firm/ Company	
	3061 SUTTON W	VOODS DR.	
		Address	
	PLANT CITY, FL	33566	
		City/ State and Zip Cod	c
CA	DILACMANEXT@	AOL.COM	
		sed for future annual report	notification)
For further information	a concerning this matter, pleas	se call:	
ANTHONY CIMINO		at (813	, 650-6509
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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		Amenc Divisic Clifton 2661 I	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of

LA BELLA NOTTE RISTORANTE, INC

(Name of Corporation as current	ly filed with the Florida Dep	t. of State)	-
P13000012606			
(Document Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the	he following amendment(s) to
A. If amending name, enter the new name of the	e corporation:		
			The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co". A pr		
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		FILED OCT 24 MI 9
D. If amending the registered agent and/or regi- new registered agent and/or the new register	stered office address in Flor	da, enter the name of th	<u></u>
_	rea office address;		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zi _l	p Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		ept the obligations of the	position.
Signature of	f New Registered Agent, if cha	nging	

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.

Example: X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove		te Jones	
X Add		ly Smith	
			A 11
Type of Action (Check One)	<u>Title</u>	Name .	<u>Addres</u> s
1) Change	PVTD	PATRICK J. LECORRE	3061 SUTTON WOODS D
Add			PLANT CITY, FL 33566
Remove			
2) Change	S	ANTHONY CIMINO	3061 SUTTON WOODS DE
			PLANT CITY, FL 33566
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional she	ing additional Article eets, if necessary).	(Be specific)			
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				· · · · · · · · · · · · · · · · · · ·	
					
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			· ···		
an amendment pr	ovides for an exchan	ge, reclassification	on, or cancellation	of issued shares,	
rovisions for impl (if not applicable	ementing the amend	ment if not conta	ined in the amend	<u>ment itself:</u>	
(g nin apprication		٨			
	1/1/	7			
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	-	<u> </u>			
			·-·		

The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date if applicable:		
Enceuve date it appareasse.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ited by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(toning group)	
The amendment(s) was/were adopaction was not required.	ted by the board of directors without shareholder action and shareholder .	
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated OCTOBE	R 17. 2013	
Dated	n /	
Signature Aut	hy this	
	ector, 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	
appointe	d tiduciary by that tiduciary)	
	ANTHONY CIMINO	
-	(Typed or printed name of person signing)	
\$	SECRETARY	
	(Title of person signing)	_