## F800/4

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SECRETARY OF STATE

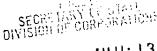
Office Use Only

Cj.615

## **COVER LETTER**

TO: Amendment Sect Division of Corpo			
NAME OF CORPOR	RATION: NOODLE T	IME, INC.	
DOCUMENT NUMI			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Janet C. Moreira,	Esq.	
		Name of Contact Person	1
	MAVEN Intellectu	ıal Property	
		Firm/ Company	
	333 S.E. 2nd Ave	enue, Suite 2000	1
		Address	
	Miami, FL 33131		
		City/ State and Zip Code	e
ian	et@maveniplaw.c	om	
<u> </u>		sed for future annual report	notification)
		·	
For further informatio	n concerning this matter, pleas	e call:	
Janet C. Moreira		at (855	636-2836
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	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)
	iling Address		Address
Amendment Section			Iment Section
Division of Corporations P.O. Box 6327			on of Corporations Building
	lahassee, FL 32314	2661 E	xecutive Center Circle
	•	Tallaha	assee, FL 32301

Articles of Amendment to Articles of Incorporation of



15 FEB -3 AMII: 13

NOODLE TIME, INC.  (Name of Corporation as currently filed with the	Florida Dant of Chata
(Name of Corporation as currently med with the	Florida Dept. of State)
(Document Number of Corporation	(if known)
•	`
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	21500 Biscayne Boulevard
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 900
	Aventura, FL 33180
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	21500 Biscayne Boulevard
	Suite 900
	Aventura, FL 33180
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
(City	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New Registered	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 us a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1) Change	<del></del>				
Add Remove					
2) Change	<del>- #</del>				
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add				<b>4</b>	
Remove					
6) Change			_		
Add					
Remove					

mending or adding additional Artic ach additional sheets, if necessary).	(Be specific)
	<del></del>
amendment provides for an excha	ange, reclassification, or cancellation of issued shares, Idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	unient is not commind in the amendment issen.
	,



The date of each amendment(s) adoptio	n:, if other than t	he
date this document was signed.	15 FED 3 7	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficien	y the shareholders. The number of votes east for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement coting 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 b action was not required.	y the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted baction was not required.	y the incorporators without shareholder action and shareholder	
February 2	. 2015	
Signature Custin	, 2015 La L. Mendy	
	president or other officer - if directors or officers have not been	
	n incorporator — if in the hands of a receiver, trustee, or other court aciary by that fiduciary)	
Crist	ina L. Mendoza	
	(Typed or printed name of person signing)	
Secr	etary, Director	
<del></del>	(Title of person signing)	