## P00000013865

ONE 10 PHE 10

July 11, 2000

DEPARTMENT OF STATE Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 300003322293--3 -07/13/00--01071--001 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Re: Your Diner, Inc.

Articles of Amendment

Dear Sir/Madam:

Please find enclosed the original and a copy of the Amendment to the Articles of Incorporation for the above referenced Corporation. Also enclosed is a check in the amount of \$35.00 to cover the filing cost.

Please return a true copy of the Amendment to the Articles of Incorporation upon filing. If there are any problems, do not hesitate to contact me.

Sincerely,

Amend



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 25, 2000

YOUR DINER, INC. 7300 W. MCNAB ROAD, #217 TAMARAC, FL 33321

SUBJECT: YOUR DINER, INC. Ref. Number: P00000013865

We have received your document for YOUR DINER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The amendment must be adopted in one of the following manners:

(1)If an amendment was approved by the shareholders, one of the following statements must be contained in the document.

(a)A statement that the number of votes cast for the amendment by the

shareholders was sufficient for approval, -or-

(b) If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

(2)If an amendment was adopted by the incorporators or board of directors without shareholder action.

(a)A statement that the amendment was adopted by either the incorporators or board of directors and that shareholder action was not required.

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6909.

Velma Shepard

OO AUG TO AH 10: 43



## ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION FOR YOUR DINER, INC.

The undersigned, being the officers and directors of YOUR DINER, INC., a Fiorida corporation, hereby certify that the following Amendments to the Articles of Incorporation were duly adopted unanimously by all officers and directors at a meeting duly held by them on the \_ 15th day of June, 2000.

## **AMENDMENTS**

1. Article IV is amended to read as follows:

The corporation shall have four (4) officers, being that of President, Vice-President, Secretary and Treasurer. The names and addresses of each officer is as follows:

Argyrios Tsakalakis, P/T 1418 Avon Lane, #2-210 North Lauderdale, FL 33068

Andreas Triantafilis, VP/S 1418 Avon Lane, #2-210 North Lauderdale, FL 33068

- 2. All shareholders who were entitled to cast a vote on the proposed amendment, have done so and all shareholders have voted in favor of said amendment.
- 3. This amendment was adopted by the shareholders on the 15th day of June, 2000.

In all other respects, the Articles of Incorporation shall remain as they were prior to this Amendment being adopted.

[SIGNATURES CONTAINED ON FOLLOWING PAGE]

IN WITNESS WHEREOF, We hereby set our hands this 15 day of June, 2000.

President/Treasurer

Andreas Tsakalakis TRIAI

Vice-President/Secretary

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 10 day of June, 2000, by Argyrios Tsakalakis and Andreas Teatralakis, as officers and directors of the foregoing corporation who is authorized to sign of behalf of the corporation and who are personally known to me or who produced their drivers licenses.