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AMend

D. COMMINA NOV 2 5 2009

COVER LETTER

• TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	POPPA'S CRAB SHACK II	NC.
DOCUMENT NU	MBER:	1809 W 45TH STREE	<u>ET</u>
The enclosed Article	les of Amendment and fee ar	e submitted for filing.	
Please return all co	rrespondence concerning this	matter to the following:	
-	GEORGE NICOLAS ABDULNOUR		
	Na	me of Contact Person	
CFO DIREC		FO DIRECT INC.	
	Firm/ Company		
_	3320 SE 27TH AVENUE		
		Address	
	GAIN	ESVILLE, FL 32641	
	Cit	y/ State and Zip Code	
	CFODIREC E-mail address: (to be used	CT@YAHOO.COM for future annual report notification)	
For further informa	tion concerning this matter, p	please call:	
GEOR	GE N ABDULNOUR	at (352) 32	7-3717
Name	of Contact Person	at (352) 32 Area Code & Daytime Telep	phone Number
Enclosed is a check	for the following amount ma	ade payable to the Florida Departn	nent of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

POPPA'S CRAB SHAC	KINC.	
(Name of Corporation as currently filed with t	he Florida Dept. of State)	
P08000042192		
(Document Number of Corporati	on (if known)	
Pursuant to the provisions of section 607.1006, Florida Statut- amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the follow	wing
A. If amending name, enter the new name of the corporation	<u>n:</u>	
	The new	
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Co name must contain the word "chartered," "professional associated. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	orp," "Inc," or "Co". A professional corporation	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

MONA MORADI

JACKSONVILLE

(City)

1809 W 45TH STREET

Signature of New Registered Agent, if changing

(Florida street address)

_, Florida_32209

(Zip Code)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	GABARANY, BEHROOZ	1809 W 45TH ST JACKSONVILLE, FL 32209	
			_
	ling or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
provisio	nendment provides for an exchange, rons for implementing the amendment ot applicable, indicate N/A)		

The date of each amendment	t(s) adoption: <u>11-17-09</u>
Effective date <u>if applicable</u> :	11-17-09 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by MONIREH MOI	RADI "
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
sele	NOVEMBER 17, 2009 a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	MONIREH MORADI
	(Typed or printed name of person signing)
	PST
	(Title of person signing)