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TALLAHASSEE, FLORIÐA

SECRETARY OF STARG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LINDBURGES WEST BOCA, INC
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARK MEYERS (Name of Contact Person)
LINDBURGERS WEST BOCA, INC. (Firm/Company)
460 N. Country Club Dr. (Address)
AtLants, FL- 33462 (City/State and Zip Code)
For further information concerning this matter, please call:
Mank Meyers (Name of Contact Person) at (_56/_) 95/-0797 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee \\ Certificate of Status \$\bigcup \\$4ditional copy is \\ enclosed\$ enclosed\$ (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	
Lindurcers	West Brok	1 TX/C.
(Name of Corporation as current	ly filed with the Florida Dept	. bf State)
DAGO	1170 22G	/
(Degument Number	er of Corporation (if known)	
(Document Number	er of Corporation (II known)	
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorporate		Profit Corporation adopts the
A. If amending name, enter the new name of th	ne corporation:	
,		
The new game must be distinguished and	and the sund Harmen	rtion P Garage P an
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "I "Co". A professional corporation name association," or the abbreviation "P.A."	Inc.," or Co.," or the designo	ation "Corp," "Inc," or
D F	-1.1	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).		
(<u> </u>	
	•	
,		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>	
		Po 3
D. If amending the registered agent and/or reg	istered office address in Flori	da, enter the name of the
new registered agent and/or the new registe		We -
Name of New Registered Agent:		
Nume of New Registered Agent.		
· <u>-</u>		
New Registered Office Address:	(Florida street address)
		, Florida
	(City)	(Zip Code)

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

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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
SECRETARY	JERI A. MEYERS	5518 SCHOUNER OAKS W STUMET, PL. 34997	Add Remove
TREASURER	John Nellis	1015 VILLA VILLAGIO Hypoluxu, Pl. 33462	Add
			Add Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets. if necessarv). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
	ere adopted by the shareholders. ere sufficient for approval.	The number of votes cast for the amendment(s)		
	- ·	through voting groups. The following statement 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/we action was not required.	ere adopted by the board of direc	tors without shareholder action and shareholder		
The amendment(s) was/we action was not required.	ere adopted by the incorporators	without shareholder action and shareholder		
Dated_ <i>/C</i> Signature	Mfr.	-		
sele		fficer – if directors or officers have not been the hands of a receiver, trustee, or other court y)		
	(Typed or printed	MARK MEYERS name of person signing)		
	TRESI (Title of per	DENT rson signing)		

The date of each amendment(s) adoption: $/ \circ - \partial \mathcal{E} - \circ \mathcal{E}$