P09000036793

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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section , Division of Corporations

NAME OF CORI	PORATION: BOWL OF PHO INC.		
DOCUMENT NU	MENT NUMBER: P09000036793		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		MINH DANG	
	N	ame of Contact Person	
	BOWL OF PHO INC.		
		Firm/ Company	
	9902 O	LD BAYMEADOWS RD	
		Address	
		SONVILLE, FL 32256	w-w
		ity/ State and Zip Code EN@YAHOO.CO d for future annual report notification)	
For further inform	ation concerning this matter,		
· ·	_		46-4455
Name	e of Contact Person	at (904) 6 Area Code & Daytime Tel	lephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tment of State:
的\$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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	le

Articles of Amendment

ZOOG NOV 16 PH 3: 44 TALLAHASSEE FLORIDA **Articles of Incorporation** BOWL OF PHO, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P09000036793

per of Corporation (if kno	wn)
Florida Statutes, this F	clorida Profit Corporation adopts the following
the corporation:	
	The new
lesignation "Corp," "Inc	"company," or "incorporated" or the c," or "Co". A professional corporation the abbreviation "P.A."
cable:	
'ADDRESS')	
E BOX)	
	n Florida, enter the name of the
	
· · ·	
(Florida street c	address)
	, Florida
(City)	(Zip Code)
Registered Agent:	
ent. I am familiar with a	and accept the obligations of the position.
nature of New Registered	d Agent if changing
	Electrical Statutes, this Factorida Statutes, this Factorida Statutes, this Factorian Statutes, this Factorian Statutes, this Factorian Statutes, the corporation, sessional association, or cable: [ADDRESS] [EBOX] [Indicatorial Street of the corporation, or cable: [ADDRESS] [Indicatorial Street of the capture of the corporation, or cable: [Indicatorial Street of the capture o

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	ALEX TRAN	9901 OLD BAYMEADOWS RD JACKSONVILLE, FL 32256	Add Remove
			_ □ Add _ □ Remove
			_ □ Add _ □ Remove
(attach a	dditional sheets, if necessary).	(Be specific)	
provisi		ange, reclassification, or cancellation of is diment if not contained in the amendment	
		· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s	adoption:
700 (1) (1) (1) (1)	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
,	(012010.112)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	**
(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	15.09
selec	a director, president of other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	MINH DANG
	(Typed or printed name of person signing)
	PRES
	(Title of person signing)