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DR - III

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ELLIE'S DESI KITCHEN INC.
DOCUMENT NUMBER: PO9 0000 88 8 331
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sort THOMAS CPA Name of Contact Person THOMAS & CO CPA PA Firm/Company 9710 STIRKIND RN # 101 Address
THOMAS & CO CPA PA
9710 STIRKING Rd # 101
COOPERCITY FX. 33024
Coopercity Fd. 33024 City/ State and Zip Code Save Cpa & TTTCPA. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person CPA at (954) 435 7272 Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

_	<u>.</u> .	FI	L	E	D
		•	•		

ELLIES DESI KITCHEN TWO (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MI/ST BF A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: JOSI JOHN

2243 SN 13184 TERR.

(Florida street address)

MIRAMAR , Florida 33027

(City) (Zip Code) Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:

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

Signature of the Hegistered 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 as 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 (Cheek One)	Title	Name	Address
Change Add Remove	<u> </u>	ELLEN A. AIELLO	PEMBRULE PINEL FL. 38024
2)Change Add / Remove	P	JOJI JOHN SUNIL SACOB	2243 SH 131 ST TER. MIRMORE FL. 33027
Change Add Remove	V	SUNIL JACOB	1540 SW 189 K- MA) PEMBREE PINE FL-33024
4) Change Add Remove	<u></u>		
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	icles, enter change(s) here: (Re specific)
anden additional sheets, if necessary).	(be specific)
	
If an amendment provides for an eyelic	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(A Alt) sustance . (11)	
(V	

The date of each amendment(s) adop	otion:
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 suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ch 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	(voting group)
	(voting group)
action was not required.	ed by the board of directors without shareholder action and shareholder
action was not required.	ed by the incorporators without shareholder action and shareholder
Dated5/	1/2012
Signature	Harry
selected, b	for president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)