## P11000042775

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Certified Copies	_ Certificates	of Status
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Date: October 24, 2011

Tina Roberts, Regulatory Specialist II Florida Department of State Davison of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Mozart Café, Inc. - Number P11000042775 - Letter: 511A00023619

Dear Ms. Roberts,

We acknowledge the receipt of your letter dated October 14, 2011 in which you have indicted that the application must be modified as per instructions.

Enclose please find a copy of the revised application and your letter dated October 14, 2011.

Please let us know if the application is completed.

Respectfully,

Nir Sibony

President

Mozart Café, Inc.

RECEIVED



October 14, 2011

YAAKOV SIBONY MOZART CAFE INC 3363 SUNNY ISLES BLVD #801 NORTH MIAMI BEACH, FL 33160

SUBJECT: MOZART CAFE, INC Ref. Number: P11000042775

We have received your document for MOZART CAFE, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one box under the adoption of amendment.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 511A00023619

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUB	JECT: Mozart Cafe, Inc.
	(Name of Corporation)
DOC	CUMENT NUMBER: P11000042775
The e	enclosed Officer Director Resignation for a Corporation and the are submitted for filing.
Pleas	se return all correspondence concerning this matter to the following:
Nir	Sibony
	(Name of Person)
Moz	zart Cafe, Inc.
	(Name of Firm/Company)
500	01 SW 37 Ave
	(Address)
Ft. I	Lauderdale FL 33312
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Nir S	(Name of Person) at ( 954 ) 610 4948 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encid Cdf	seed is a check for \$35.00 made payable to the Florida Department of State.  BECK WAS SENT WITH PREVIOUS Coly of THE AMERICATON.
Stree Amer Divis Clifto 2661	Mailing Address: Amendment Section ion of Corporations on Building Executive Center Circle hassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## **Articles of Amendment**

## Articles of Incorporation of

(Name of Corporation as cur	rently filed with	the Florida Dept.	of State)	
(Document No	ımber of Corporat	tion (if known)		
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation.		tes, this <i>Florida P</i>	rofit Corporation adop	ots the following
A. If amending name, enter the new name	of the corporatio	on:		
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pi	ne designation "Č	orp, " "Inc, " or "C	Co". A professional co	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4433 Striling F	Road	_
		Dania Beach FL 33314		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		4433 Strilling R		- - -
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office gistered office add	address in Florida dress:	a, enter the name of th	<u>1e</u>
Name of New Registered Agent:	Nir Sibony		·····	
	5001 SW 37	Ave		
New Registered Office Address:	(Flori	ida street address)		
	Ft. Lauderdal	e	, Florida_33312	2
New Registered Agent's Signature, if chang	(City)	cont:	(Zip Code)	
I hereby accept the appointment as registered	agent. I am fami	iliar with and accep	t the obligations of the	position.
W.	Signature of New	Registered Agent, i	f 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:

<u>Title</u>	Name	Address	Type of Action
Preside	Izhak Kashani	3363 Sunny Isles Blvd Suite 801 North Miami Beach, FL 33160	☐ Add ☑ Remove
Treasu	Morty Etgar	3363 Sunny Isles Blvd Suite 801 North Miami Beach, FL 33160	☐ Add ☑ Remove
Presid	Nir Sibony	4433 Striling Road  Dania Beach FL 33314	☑ Add ☐ Remove
	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
<u>provisions</u>	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of issues to contained in the amendment it	ied shares, self:
		<b>9</b> ·	
<del></del>	· · · · · · · · · · · · · · · · · · ·		

The date of each amendmen	t(s) adoption:
. • •	(date of adoption is required)
Effective date if applicable:	(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) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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	(voting group)
	(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
Dated_Oct	ober 19, 2011
Signature _	
sel	y 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)
	Nir Sibony
	(Typed or printed name of person signing)
	President
	(Title of person signing)