P12000043615

| (Re | questor's Name) | |
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| (Ad | dress) | |
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| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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SERVE THE SERVED STATES

Amend

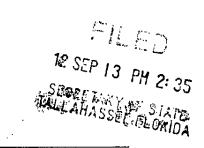
SEP 1 7 2012

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: MOZAF | RT GRILL EXPRES | S, INC. |
|--|--|--|
| DOCUMENT NUMBER: P1200004 | 3615 | |
| The enclosed Articles of Amendment and fee | are submitted for filing. | |
| Please return all correspondence concerning the | his matter to the following: | |
| MORTY ETG | AR | |
| MORTY ETG | | on |
| 3363 SUNNY | Firm/ Company ISLES BLVD., SU | TE 801 |
| NORTH MIAN | MI BEACH, FL 3316 | |
| EDONTDESKOE | City/ State and Zip Cod | le |
| | TGARCPA.COM o be used for future annual repor | t notification) |
| For further information concerning this matter | r, please call: | • |
| MORTY ETGAR | at (305 | 577-0454 ode & Daytime Telephone Number |
| Name of Contact Person | Area C | ode & Daytime Telephone Number |
| Enclosed is a check for the following amount | made payable to the Florida Dep | partment of State: |
| ■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta | _ | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amen Divisi Clifto 2661 | t Address dment Section on of Corporations n Building Executive Center Circle |



Articles of Amendment to **Articles of Incorporation**

MOZART GRILL EXPRESS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P12000043615

lment(s) to

| (Documer | nt Number of Corporation (if | known) | |
|--|--------------------------------|--------------------|--------------------------------------|
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this F | Torida Profit Cor | poration adopts the following amends |
| A. If amending name, enter the new na | ame of the corporation: | | |
| Ņ/A | • | | The ne |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | nation "Corp," "Inc," or "C | co". A profession | r "incorporated" or the abbreviation |
| B. Enter new principal office address, (Principal office address <u>MUST BE A S</u> | | | |
| 7 | | | |
| C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>) | | C/O MOR | RTY ETGAR, P.A. |
| | | 3363 SUNNY | ISLES BLVD., SUITE 801 |
| | | NORTH MIA | MI BEACH, FL 33160 |
| D. If amending the registered agent an new registered agent and/or the new | | | er the name of the |
| Name of New Registered Agent | | | |
| | 3363 SUNNY ISLES | * | TE 801 |
| | (Florida stre | • | 33160 |
| New Registered Office Address: | (City) | DEACH | _, Florida_33160 |
| | (City) | | (Elp Code) |
| | | | |
| New Registered Agent's Signature, if c | | | |
| l herehy accept the appointment as regist | dered agent. I am familiar w | ith and accept the | obligations of the position. |
| Si | gnature of New Registered A | ent. if changing | |
| 5,4 | | 7 9 | |

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 <math>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> <u>John</u> | Doe | |
|-------------------------------|------------------------|---------------|-----------------------------|
| X Remove | <u>V</u> <u>Mik</u> | e Jones | |
| X Add | <u>SV</u> <u>Sally</u> | y Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | PTD | ARFI, ORLEE | 18120 COLLINS AVE |
| Add | | | SUNNY ISLES, FL 33160 |
| X Remove | | | , |
| 2) Change | Р | IZHAK KASHANI | 3363 SUNNY ISLES BLVD. |
| X | | | SUITE 801 |
| Remove | | | NORTH MIAMI BEACH, FL 33160 |
| 3) Change | | | · . |
| Add | | | |
| Remove | | | |
| 4) Change | | | · : |
| Add | | | yr |
| Remove | | | |
| 5) Change | <u></u> | | |
| Add | | | · |
| Remove | | | |
| 0 01 | | | |
| 6) Change | , | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | : |
|--|--------------------------------|
| (Attach daditional sneets, if necessary). (he specific) | |
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| N/A | |
| IN/A | |
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| | <u> </u> |
| • | |
| F. If an amendment provides for an exchange, reclassification, or oppositions for implementing the amendment if not contained in | cancellation of issued shares, |
| (if not applicable, indicate N/A) | |
| | |
| | |
| | |
| | |
| N/A | |
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| - | |
| | |

| he date of each amendment(s) a | doption: 09/05/2012 |
|--|---|
| ffective date if applicable: 09/05/2012 | |
| <u> </u> | (no more than 90 days after amendment file date) |
| doption of Amendment(s) | (<u>CHECK ONE</u>) |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval. |
| | proved by the shareholders through voting groups. The following statement 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) |
| action was not required. | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder |
| action was not required. | speed by the meorporators without shareholder action and shareholder |
| Dated 09/05/ | 2012 |
| . Signature | Only anti |
| selecte | lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) |
| | ORLEE ARFI |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |