P/2000/02935

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: CRAZY CHEF INC DOCUMENT NUMBER: P12000102935 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: David Francis Trant III Name of Contact Person Firm/ Company **7624 SUN VISTA WAY** Address Orlando, FL, 32822 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 808-1480
Area Code & Daytime Telephone Number Ali K Seif Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & \$35 Filing Fee **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

CRAZY CHEF INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000102935

(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

name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ntain the word "corporation," "componation "Corp," "Inc," or "Co". A prodution," or the abbreviation "P.A."	any," or "incorporated" or the abo ofessional corporation name must co
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
	-	
C. Enter new mailing address, if appl	<u>icabłe:</u>	
	OFFICE BOX)	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	
	<u>OFFICE BOX</u>)	
(Mailing address <u>MAY BE A POST</u>		ide outputhe name of the
(Mailing address <u>MAY BE A POST</u>	nd/or registered office address in Flori	ida, enter the name of the
(Mailing address MAY BE A POST . If amending the registered agent as	nd/or registered office address in Flori	ida, enter the name of the
(Mailing address MAY BE A POST). If amending the registered agent are new registered agent and/or the new	nd/or registered office address in Flori w registered office address:	ida, enter the name of the
(Mailing address MAY BE A POST). If amending the registered agent are new registered agent and/or the new	nd/or registered office address in Flori w registered office address: Ali K Seif	
(Mailing address MAY BE A POST). If amending the registered agent are new registered agent and/or the new	Ad/or registered office address in Flori w registered office address: Ali K Seif 6827 Spring Rain Dr (Florida street address)	ida, enter the name of the , Florida 32819

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	PT J	ohn Doe	
X Remove	<u>v</u> <u>n</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	JUN KI, HONG	8918 PEACEROSE LN
Add			ORLANDO, FL 32818
X Remove			
2) Change	Р	David Francis Trant III	7624 SUN VISTA WAY
X Add			ORLANDO, FL 32822
Remove			
3) Change			
Add			
Remove			· · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
16	harry and a local control of the same data and a
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ad	option: 4-24-/3
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more inan 90 days after amenament file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved 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 f	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated_ 4-24	-13
Dated_4-24 Signature_K	A Junil F trans It
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
-	DAVID F. TRANT
	Preschent
•	(Title of person signing)