## 3000036137

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	· #)		
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(Bu	siness Entity Nam	ne)		
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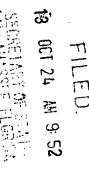
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: F & K RES	TAURANT GRO	UP, INC.
DOCUMENT NUMB	ER: P1300003613	7	
	f Amendment and fee are su		
Please return all corresp	oondence concerning this mat	ter to the following:	
,	William Lopez, Jr		
•		Name of Contact Persor	1
•	TropezCPA		
-		Firm/ Company	
	4781 N. Congres	s Avenue, Suite	161
•		Address	
_	Boynton Beach, F	-lorida 33426	
		City/ State and Zip Code	2
mar	nagement@trope	zcpa.com	
		ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
William Lopez	Z	<sub>at (</sub> 561	907-8278
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filling 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment ŧo Articles of Incorporation of

F & K RESTAURANT GRO	UP	. INC.
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1 4 1 1 2 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1	
(Name of Corporation as currently filed with the Florida Dept. of	State)
P13000036137	
(Document Number of Corporation (if known)	

A. If amending name, enter the new na	me of the corporation:				
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or		n		
. •		99 SE Mizner Boulevard			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Suite 110			
		Boca Raton, Florida 33432			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		99 SE Mizner Boulevard S			
		Suite 110 25 2	1		
		Boca Raton, Florida 33432	1		
D. If amending the registered agent an new registered agent and/or the new					
Name of New Registered Agent	TropezCPA				
	4781 N. Congre	ess Ave, Suite 161			
	(Florida street address)				
New Registered Office Address:	Boynton Beach Florida 33426				
<b></b>	(City	(Zip Code)			
New Registered Agent's Signature, if c	hanging Registered Agen	t: with and accent the obligations of the position			
I hereby accept the appointment as regist	ereologent. I am familia	with and accept the obligations of the position.			
$\mathcal{L}_{Si}$	gnature of New Registered	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 (Check One)	Title	Name	<u>Addres</u> s
1) Change	P/D	Lee Tushman	99 SE Mizner Boulevard
Add			Suite 110
Remove			Boca Raton, Florida 33432
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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, JFA.80		-			
`an amendment or	ementing the ame	hange, reclassifica endment if not con	tion, or cancellation tained in the amer	on of issued share	<u>.s.</u>
provisions for impl	le, indicate N/A)				
provisions for impl	le, indicate N/A)				· <u>···</u>
provisions for impl	le, indicate N/A)				
provisions for impl	le, indicate N/A)				
provisions for impl	le, indicate N/A)				
provisions for impl	le, indicate N/A)				
provisions for impl	le, indicate N/A)				

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	_
	(no more than 90 days after amenament file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	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 east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_October	01, 2013	
Signature	Lee Tulman	
	irector, 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)	
	Lee Tushman	
	(Typed or printed name of person signing)	<del></del>
_	President	
	(Title of person signing)	