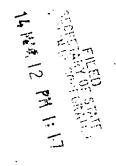
## P14000011039

Office Use Only



000257519340

03/12/14--01021--009 \*\*105.00



Amend

10,3,13,14

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

15

NAME OF CORPORA	TION: GRASS RC	OTS FRANCHI	SE, INC.
	R: P1400001163		
	"Amendment and fee are su		
Please return all correspondent	ondence concerning this mat	ter to the following:	
	NA GUZMAN		
		Name of Contact Person	1
- 7	′685 SW 104 ST	Firm/ Company	
	003 377 104 31	Address	
N	ИІАМІ, FL 33156		
<del>-</del>		City/ State and Zip Code	2
ANA	@JEFFREYFEII		
	E-mail address: (to be us	ed for future annual report	notification)
For further information of	concerning this matter, pleas	e call:	
ANA GUZMAN	N	at ( 305	, 670-7700
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Filing 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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

FILED STATE 14 W# 12 PH 1: 17 Documen Aumber of Corporation (It known)

(Documen Aumber of Corpora GRASS ROOTS FRANCHISE, INC. The new new abbreviation the abbreviatio company or incorporation name must comain the company of A professional corporation A. If anending name enter the new name of the corporation. mante must be distinguishable and contain the word ... or the abbreviation or the designation.

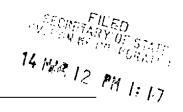
Manual manu P14000011639 9655 SOUTH DIXIE HWY Is Articles of Incorporation. B. Enter new principal office address Humpicaphe. ASTREET ADDRESS Merincipal office address MUST BE ASTREET ADDRESS (Principal office address MUST BE ASTREET ADDRESS) MAMI, FL 33156 D. Hamending the registered agent and/or the new registered office address: STE 200 Enter new maine andress if applicable: CE BOX If amending the registered agent and/or the new registered office address: Same of New Besignered Veent Sen Registered Agent's Signature if changing Registered agent familiar with and accept the appointment as registered agent New Registered Agent's Signature if changing Registered agent

Agent's Signature if changing Registered agent agent

Agent's Signature if changing Registered agent

Agent's S

## Articles of Amendm@t to Articles of Incorporation of



## GRASS ROOTS FRANCHISE, INC.

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

b14000011639

(Document Number of Corporation (if known)

ndment(s) to

A. If amending name, enter the new name of the corpo	ration:
	corporation," "company," or "incorporated" or the ab Inc," or "Co". A professional corporation name must c reviation "P.A."
Enter new principal office address, if applicable:	9655 SOUTH DIXIE HWY
Principal office address <u>MUST BE A STREET ADDRES</u>	STE 200
	MIAMI, FL 33156
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9655 SOUTH DIXIE HWY
	STE 200
	MIAMI, FL 33156
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent	MIAMI, FL 33156
<u>Name of New Registered Agent</u>	MIAMI, FL 33156
Name of New Registered Agent	MIAMI, FL 33156  office address in Florida, enter the name of the ce address:  (Florida street address)
new registered agent and/or the new registered office  Name of New Registered Agent	MIAMI, FL 33156  office address in Florida, enter the name of the ce address:  (Florida street address)
Name of New Registered Agent ————————————————————————————————————	MIAMI, FL 33156  office address in Florida, enter the name of the ce address:  (Florida street address)  . Florida (Cny) (Zip Code)



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 John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PRES	JEFFREY E. FEILER	7685 SW 104 ST
Add			STE 200
Remove			MIAMI, FL 33156
2) Change	PRES	BRIAN KOSLOW	9655 SOUTH DIXIE HWY
Add			STE 200
Remove			MIAMI, FL 33156
3) Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
Kemove			

f amending or adding additional Article Attach additional sheets, if necessary).	(Be specific)			
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				•
<del></del>		******		
······································				
f an amendment provides for an excha-	nge, reclassification	i, or cancellation	of issued share:	<u>S.</u>
provisions for implementing the ameno (if not applicable, indicate N/A)	iment if not contain	ied in the amend	ment itself:	
(y not appactane, indicate toxi)				
		-		
				•
•				

The date of each amendment(s) ad	option: MARCH 3, 2014	, if other than the
date this document was signed.		
Effective date if applicable:		<del></del>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sui	pted by the shareholders. The number of votes cast for the amendment(s) fficient 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 i	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action 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 March 3	, 2014	
g: C	AND -	
Signat <del>ure</del> (By a di	rector, president or other officer – if directors or efficers have not been	
selected	I, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary)	
	BRIAN KOSLOW	
•	(Typed or printed name of person signing)	
	PRESIDENT	