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SEURA LAREZ PATRIBO

a.M. 8-19-14

## COVER LETTER

TO: Amendment Section

Division of Corpo	orations			SSE S
NAME OF CORPOR	AATION: WOK BOX	GROUP, INC.		
DOCUMENT NUMB	D1400005007			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	·	7
Please return all corres	pondence concerning this ma	tter to the following:		
	PAUL SCHOLTE	es :		
•		Name of Contact Per	rson	
-		Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	5500 MILITARY	TRAIL, SUITE	22-316	• •
-	· · · · · · · · · · · · · · · · · · ·	Address		
	JUPITER, FL 334	158		
		City/ State and Zip C	Code	
PAI	JLSCHOLTESPI(	@GMAIL.COM	1	
	E-mail address: (to be us			-
For further information	concerning this matter, pleas	se call:		
PAUL SCHO	LTES	<sub>at (</sub> 561	385-8163	
Name o	of Contact Person	Area	Code & Daytime Telephone N	umber
Enclosed is a check for	r the following amount made	payable to the Florida D	repartment of State:	
■ *\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	, 4 ,,
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Amo Div	eet Address endment Section ision of Corporations ton Building	``

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

WOK BOX GROUP, INC.		27 0
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	- Gim W
P14000050977		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corporation:		
WBG FL, INC.		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name musi	abbreviation
8. Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADDRESS</u> )		
		<del>-</del> :
		_ !
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5500 MILITARY TRAIL	•
	SUITE 22-316	<del></del>
	JUPITER, FL 33458	_ '
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	•
N/A		
Name of New Registered Agent		
(Florida stre	at address)	. :
NI/A		
New Registered Office Address: (City)	, Florida(Zip Code)_	<del>_</del>
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.	. •
Signature of New Registered A	gent 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 Rem Example:	ove, and Sa	ally Smith; SV as an Add.	4 AU ECR	******
X.Change	PT	John Doe	AUG - CRETA LAHAS	
X Remove	<u>v</u>	Mike Jones		m
X Add	<u>sv</u>	Sally Smith	in s	Ö
Type of Action (Check One)	Title	Name	AM 10: 03  CF. STATE FLORIDA  Address	
1) Change	D	ADAM SABOCIK	2362 NW 120TH LANE	
Add			CORAL SPRINGS,	
Remove			FLORIDA 33065	
2) Change				
Add			**************************************	<del></del>
Remove				<del></del>
3) Change				
Add				. <u></u>
Remove				<del></del>
4) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				<del></del>
5) Change	******			
Add				
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6) Change				
Add				
Remove				

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If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	8 30
/A	
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	• • • • • • • • • • • • • • • • • • •
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
(y noi applicable, maicale (VA)	
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The date of each amendment(s) adoption: JUNE 10, 2014 date this document was signed.	, if other than the
Effective date if applicable:  UNE 10, 2014  (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	14 6
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	<b>a</b>
(voting group) । । । । । । । । । । । । । । । । । । ।	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	AR IO: 03
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	<u>a</u>
Dated AUGUST 5, 2014 Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	,
PAUL SCHOLTES	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	•