P15000033386

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285 JUL 21 PH 12: 59

Amend

JUL 22 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Falafel Inn Mediterranean Grill, Inc.					
DOCUMENT NUMBER: P15000033386					
	of Amendment and fee are su	abmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	Raied J Ahmed				
•		Name of Contact Perso	n		
	Falafel Inn Mediterranean Grill, Inc.				
-	Firm/ Company				
	777 North Ashley Dr. Suite B				
-	Address				
	Tampa, FL 33602				
-	City/ State and Zip Code				
alnawa	amiali@gmail.com				
		sed for future annual report	notification)		
For further information	concerning this matter, pleas		475-1007		
Name of	f Contact Person	at (at (de & Daytime Telephone Number		
	the following amount made				
\$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

Falafel Inn Mediterranean Grill, Inc.				
(Name	of Corporation as currently i	iled with the Florida De	pt. of State)	
P15000033386				
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this Florida Statutes, the Florida	orida Profit Corporation	adopts the following	amendment(s) t
A. If amending name, enter the new n	ame of the corporation;			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	". A professional corpo		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
				
C. Enter new mailing address, if appl	ionhla.			E . 30
(Mailing address MAY BE A POST				
				.i.
D. If amending the registered agent ar new registered agent and/or the ne		s in Florida, enter the n	ame of the	ML 21 PH 12: 59
	Raied J Ahmed			96
Name of New Registered Agent	777 North Ashley Dr. Suite	R		
	(Florida street			
N . D	Tampa		, Florida 33602	
New Registered Office Address:	(C	ity)	, Florida(Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regis		h and accept the obligation	ons of the position	
207 woodpt in appointment us rogis	The second of th	ourgant	y p warriern	
	1/			

Signature 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	<u>Name</u>	<u>Addres</u> s
1) Change	V	Zainab Al-Nawami	777 North Ashley Dr.
Add			Suite B
X Remove			Tampa, FL 33602
2) X Change	Р	Raied J Ahmed	777 North Ashley Dr.
Add			Suite B
Remove			Tampa, FL 33602
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	····		
Ad d			<u> </u>
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
	-
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
G qq	

	7/15/2015	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
6/15/	2015	
Effective date if applicable:		1
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this bidocument's effective date on the Dep	ock does not meet the applicable statutory filing requiartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the ficient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The factor ach voting group entitled to vote separately on the amount	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action	n and shareholder
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and	l shareholder
Dated7/17/20	15	
••	1100	
Signature X		
	ector, president or other officer - if directors or officer	
	, by an incorporator – if in the hands of a receiver, trust	ee, of other court
арроппо	d fiduciary by that fiduciary)	
	Raied J Ahmed	
•	(Typed or printed name of person signing)	
	President/Stockholder	
-	(Title of person signing)	