P1500008954a

(Requestor's Name)	
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· (Business Entity Name)	
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SEP 0 9 2016 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: House of Wings Pl	ace, Inc.			
DOCUMENT NUM	1BER:				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this mat	ter to the following:			
	Jorge Ochoa				
		Name of Contact Person	<u></u>		
House of Wings Place, Inc.					
		Firm/ Company			
1300 3rd St W					16
Address					
Winter Haven Fl 33880					SEP -8
		City/ State and Zip Code	e		
				(12) (12)	7
	E-mail address: (to be us	ed for future annual report	notification)	\$100 gr 1	2: 16
For further informati	on concerning this matter, pleas	e call:			
Jorge Ochoa		at (268-4477		
Name	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment 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)		
Ar Di	ailing Address nendment Section vision of Corporations O. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

FLORIDA DEPARTMENT OF STATE DIVISION OF CURPORATION

I would like to ask for realising the corporation name House of Wings, Inc. Document Jumber P15000089542), For the new name of San Diego's Me-xican Grill and Spor Bar

Atte.

JOSE HERNANDEZ

16 SEP -9 AM 2: \$0 DEPARTHEM OF STATE BIVISION OF CORPORATIONS ON SELL AND SEEF FLORIDAR



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 7, 2016

JORGE OCHOA HOUSE OF WINGS PLACE, INC. 1300 3RD ST W WINTER HAVEN, FL 33880

SUBJECT: HOUSE OF WINGS PLACE, INC.

Ref. Number: P15000089542

We have received your document for HOUSE OF WINGS PLACE, INC. and your check(s) totaling \$43.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 516A00018835

Articles of Amendment to Articles of Incorporation of

6 SEP-8 PH P

House of Wings, Inc.		المعربة المعربة	7
(Name of Corporation as curr	rently filed with the Florida Dept. of State)	4.9 6 mil - 4.1 7 mil - 4.1	43
P15000089542			Ø
(Document Numb	per of Corporation (if known)	,	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following	ing amendment	(s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>		
San Diegos's Mexican Grill And Sport Bar, Inc.		The new	
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name mus	abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1300 3rd St W Winter Haven FL 33880		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add			
Name of New Registered Agent			
(Florid	da street address)	_	
New Registered Office Address:	, Florida		
	(City) (Zip	o Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia			
Signature of M	ow 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 <math>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 Do	2			
X Remove	<u>v</u>	Mike Jor	<u>ies</u>			
X Add	<u>sv</u>	Sally Sm	<u>ith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change	VP	_	Jose Hernandez		3821 Laurel Crest Dr	
Add					Mulbery, FL 33860	
X Remove						
2) Change			<u></u>			•
Add						_
Remove						
3)Change						
Add					<u> </u>	
Remove						
4) Change		_				_
Add						
Remove						_
5) Change	<u></u>					
Add						
Remove						
						_
6) Change	<u> </u>					_
Add						
Remove						

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
	
r. It an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Jorge Ochoa 100% Shares	

The date of each amendment date this document was signed		, if other than the
date this document was signed	08/15/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u></u>
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wei by the shareholders was/wei	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	l
	re approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
08/17 Dated Signature	0x49 5 OCHOO	
(Ē	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	Jorge Ochoa	
	(Typed or printed name of person signing)	
	President ONUP T OCHOG	
	(Title of person signing)	