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(Business Entity Name)					
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Certified Copies Certificates of Status					
 					
Special Instructions to Filing Officer:					





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2016 JAN 18 AH 3: 14

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE JO	DILE CRAB INC			
DOCUMENT NUMBER: P17000	071846			
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
JAMES V GURIQUEZ				
	Name of Contact Person			
THE JOH	Firm/ Company			
14223 (CON'AL POINTE DR			
WINTER	GARDEN FL 34787 City/ State and Zip Code			
	City/ State and Zip Code			
Jonieca	ed for future annual report notification)			
E-mail address: (to be us	ed for future annual report notification)			
For further information concerning this matter, please call:				
JAMES V GNRIQUEZ	at (847) 833-7082 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is Certified Copy			
CHEEL IS ON	enclosed) (Additional Copy			
HOLD AT YOUR DEPARTMENT	is enclosed)			
FOR AFIE AMENOMENT Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

2012	,i
2018 JAN 18	AK 32 100

THE JOINE CRAP	3 INC
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P17000071846	
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
J CRAB HOUSE	TNC.
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation ".	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4807 W IRIO BRONSON MEMOR
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	4807 W IRIO BRONSON MEMORY SUITE E
	KISSIMMEE FL 34746
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14223 COLONIAL POINTE DR WINTER GARDEN FL 34787
D. If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address:	
Name of New Registered Agent JAMES V	ENRIQUEZ
14223 COL	ONIAL POINTE DR
New Registered Office Address: WITER GA	RDEN Florida 34787 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	

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 <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 Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>\</u>	WILLIAM KLEIN	3708 S CONWAY RD
Add			ORIANDO FL 32912
Remove			
2) Change	1	THELINA ENRIQUEZ	14223 COLONIAL POINTE DR
X Add			WINTER GARDEN FL 3478
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damasa			

E: Aff amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ADDRESS NEEDS TO BE CORRECTED
FROM: 4807 IRO BRONSON MEMORIAL HWY SOITE ALLO KISSIMMEE FL 34746
TO: *CORRECT ADDRESS * 4807 W. TRLO BRONSON MEMORIAL HWY SUITE E KISSIMMER FL 34746
**LETTER FOR CORRECT ADDRESS ATTRICHED BY LEASING COMPANY **
F. 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)

The date of each amendment(s) adoption: _	NAU	11	201 %	, if other than th
late this document was signed.				
Effective date if applicable:	JAN	11	2018	
	(no more than	n 90 day	s after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of			statutory filing requirements	s, this date will not be listed as th
Adoption of Amendment(s) (C	HECK ONE)			
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		'he num	ber of votes east for the ame	ndment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voting				
"The number of votes cast for the am	endment(s) was/v	vere suf	ficient for approval	
by	oting group)		·"	
Ò	oting group)			
☐ The amendment(s) was/were adopted by the action was not required.	e board of directo	ors with	out shareholder action and sh	nareholder
The amendment(s) was/were adopted by the action was not required.	e incorporators w	ithout s	hareholder action and shareh	older
Dated JAN 1	1 2018	}	-	
)			
Signature (N) a director			if directors or officers have r	h
			if directors or officers have r is of a receiver, trustee, or o	
	ry by that fiducia			
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	vames i	<u>J_E</u>	NRIWEZ	
	(Typed or printe	ed name	of person signing)	
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	/Tip:	la of por	con signing)	