P17000088459

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: WOLF	Oppot Inc				
DOCUMENT NUMBER: P1760	2088459				
The enclosed Articles of Amendment and fee a	are submitted for filing.				
Please return all correspondence concerning th					
Physical	Name of Contact Person				
\^(\)	Name of Contact Person				
Phancin Halli Name of Contact Person Wgit Depot Inc Firm/ Company					
6720 E. Fuller Ave. Ste 157					
	7 ttti (413				
TEMPLETERVICE TL. 33617 City/ State and Zip Code					
SUPEr @ PANCAKE record z. com TE-mail address: (to be used for future annual report notification)					
`	•				
For further information concerning this matter,	please call:				
Rhonda Hills	at (813)279-4192				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount in	nade payable to the Florida Department of State;				
S35 Filing Fee □\$43.75 Filing Fee Certificate of Star	_				
Mailing Address Amendment Section	Street Address Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327 Tallahassec, FL 32314	Clifton Building 2661 Executive Center Circle				
	Tallahassee, FL 32301				

Articles of Amendment fo

Articles of Incorporation of

of of	
Wait Donot Inc	
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P17000088459	
(Document Number of C	
Pursuant to the provisions of section $607,1006$, Florida Statutes, this $Florida$ its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
The Waitress Inc	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	7. S. 28.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	T SE T
	52 0 m
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	0,
Name of New Registered Agent	्वा स्वर्
	•
(Florida street	address)
New Registered Cifice Address:	, Florida
(C	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of New Reg	istered 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 efficer/director title by the first letter of the effice title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Giftier; CFO = Chief Financial Giftier. If an efficient holds more than one title, list the first letter of each effice 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 De	<u>æ</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
_X Add	<u>sv</u>	Sally St	<u>pith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				
Remove				
2)Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5)Change		_		
Add				
Remove				
6)Change		_		
Add				
Remove				

•	icles, enter change(s) here: (Be spec.fic)
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· · · · · · · · · · · · · · · · · · ·	Name to the state of the state
· · · · · · · · · · · · · · · · · · ·	
	nange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch	adment if not contained in the amondment itself:
provisions for implementing the amer	endment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the amer (f not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the amer	endment if not contained in the amendment itself:
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provisions for implementing the amer	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	11
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(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 action was not required.	
Dated 09/05/2011	
Signature Lun m	
(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)	
(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
(Typed or printed name of person signing)	
President	
(Title of person signing)	