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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

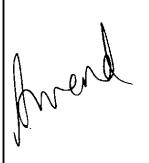
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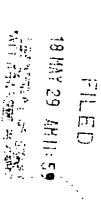


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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPOR	RATION: Naples House of C	Omelets Inc	
DOCUMENT NUMI	P17000089798		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	John G Ropp		
		Name of Contact Persor	1
	Tax Prep USA		
		Firm/ Company	
	2104 Del Prado Blvd S Ste 3	• •	
		Address	
	Cape Coral, FL 33990		
		City/ State and Zip Code	2
iohn/	િશ્વાસ prepusa.com		<b>v</b>
<del></del>	•	sed for future annual report	·
For further informatio	n concerning this matter, pleas	se call:	
John G Ropp		at ( 239	242-1040
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Naples House of Omelets Inc

Naples House of Officiets inc	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000089798	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Floridu Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	T1
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 "I	Co". A professional corporation name must contain the
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)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent	
(Florida stre	
(r tortaa stre	et aauress)
New Registered Office Address:	, Florida City) (Zip Code)
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 Re	egistered 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: <u>X</u> Change	<u>p</u> T	John Doe	<u>:</u>	
X Remove	<u>v</u>	Mike Jon	<u>es</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>	1	<u>Name</u>	Address
1) Change	P	_	Toni Dedaj	4623 SW 17th Ave
Add x Remove				Cape Coral, FL 33914
2) Change	PDTS	_	Meri Dedaj	4623 SW 17th Ave
X Add				Cape Coral, FL 33914
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u></u>		
Add				
Remove				
6) Change		_		
Add				
Remova				

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
		<u>.</u>
		<del> </del>
		· · · · · · · · · · · · · · · · · · ·
		····
If an amendment provides for an excl	nange, reclassification, or cancellation of issued share	<del>28,</del>
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	

	01/01/18	*# .I .I .I
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
May 22, 1 Dated	2108	
Signature	director, president or other officer – if directors or officers have not been	
(By a	ed by an incorporator – if in the hands of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	
	Toni Dedaj	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	<del></del>