## P20000037770

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## COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	WOLF BAR & GRILL, INC.
DOCUMENT NUMBER:	P20000037770
The enclosed Articles of Amendment and	d fee are submitted for filing.
Please return all correspondence concerni	ing this matter to the following:
	WILLIAM WOLF
	Name of Contact Person
	WOLF'S STEAKHOUSE, INC.
	Firm/ Company
	5360 S. UNIVERSITY DRIVE, STE 2
	Address
	DAVIE, FL 33328
	City/ State and Zip Code
	billwolf@bellsouth.net
E-mail addres	s: (to be used for future annual report notification)
For further information concerning this m	latter, please call:
BILL WOLF	at (954 ) 252-9653
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filir Certificate o	
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporation	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

## (Name of Corporation as currently filed with the Florida Dept. of State)

Artic	cles of Amendment to
Article	les of Incorporation
WOLF	cles of Amendment to les of Incorporation of BAR & GRILL, INC.  currently filed with the Florida Dept. of State)
(Name of Corporation as o	currently filed with the Florida Dept. of State)
	20000037770
(Document No	fumber of Corporation (if known)
suant to the provisions of section 607.1006, Florida Statut Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendments
If amending name, enter the new name of the corpora	ation:
WOLF	S STEAKHOUSE, INC. The new
an amount be a district and about the manufacture of the control o	. "" " " " " " " " " " " " " " " " " "
.," or Co.," or the designation "Corp," "Inc," or "	ttion," "company," or "incorporated" or the abbreviation "Corp., "Co". A professional corporation name must contain the word n "P.A."
.," or Co.," or the designation "Corp," "Inc," or " artered," "professional association," or the abbreviation internew principal office address, if applicable:	'Co". A professional corporation name must contain the wordn "P.A."
.," or Co.," or the designation "Corp," "Inc," or " artered," "professional association," or the abbreviation internew principal office address, if applicable:	'Co". A professional corporation name must contain the wordn "P.A."
," or Co.," or the designation "Corp," "Inc," or " rtered," "professional association," or the abbreviation inter new principal office address, if applicable: acipal office address <u>MUST BE A STREET ADDRESS</u>	'Co". A professional corporation name must contain the wordn "P.A."
e.," or Co.," or the designation "Corp," "Inc," or " cartered," "professional association," or the abbreviation  Enter new principal office address, if applicable: Incipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable:	'Co". A professional corporation name must contain the wordn "P.A."
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e.," or Co.," or the designation "Corp," "Inc," or " cartered," "professional association," or the abbreviation  Enter new principal office address, if applicable: Incipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable:	(Co". A professional corporation name must contain the wordn "P.A."  5360 S. UNIVERSITY DRIVE, STE 2
" or Co.," or the designation "Corp," "Inc," or "or the abbreviation of the principal office address, if applicable: acipal office address MUST BE A STREET ADDRESS or abbreviation of the abbreviation of	(Co". A professional corporation name must contain the word "P.A."  5360 S. UNIVERSITY DRIVE. STE 2  DAVIE, FL 33328
e.," or Co.," or the designation "Corp," "Inc," or " streted," "professional association," or the abbreviation  Enter new principal office address, if applicable: Incipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5360 S. UNIVERSITY DRIVE, STE 2  DAVIE, FL 33328  Fice address in Florida, enter the name of the
e.," or Co.," or the designation "Corp," "Inc," or " intered," "professional association," or the abbreviation Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable: [Mailing address MAY BE A POST OFFICE BOX]  If amending the registered agent and/or registered office a	5360 S. UNIVERSITY DRIVE. STE 2  DAVIE. FL 33328  Fice address in Florida, enter the name of the address:
e.," or Co.," or the designation "Corp," "Inc," or " intered," "professional association," or the abbreviation Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	5360 S. UNIVERSITY DRIVE. STE 2  DAVIE. FL 33328  Fice address in Florida, enter the name of the address:
e., " or Co., " or the designation "Corp," "Inc," or " artered," "professional association," or the abbreviation Enter new principal office address, if applicable: ncipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office a Name of New Registered Agent	5360 S. UNIVERSITY DRIVE, STE 2  DAVIE, FL 33328  fice address in Florida, enter the name of the address:
e.," or Co.," or the designation "Corp," "Inc," or " intered," "professional association," or the abbreviation Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office a  Name of New Registered Agent	5360 S. UNIVERSITY DRIVE, STE 2  DAVIE, FL 33328  fice address in Florida, enter the name of the address:

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_	<u>.                                    </u>	
Add				
Remove				
5) Change		_		
Add				
Remove				<u></u>
6) Change		_		
Add	-			
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del>	
f an amendment provides for an exchange the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	adment it not contained in the amendment tisen.
<u> </u>	
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	6/19/20	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, to partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	er action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend fficient for approval.	ment(s)
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s)	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
6/19/20 Dated Signature	A Maria	
selected	ector, president or other office – if directors or officers have not, by an incorporator – if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary).	
	WILLIAM WOLF	
-	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	<del> </del>