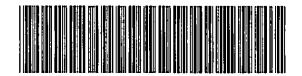
## P20000 50787

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE

"" OF COMPORATION"

## COVER LETTER

TO: Amendment Section Division of Corporations

, ,

NAME OF CORPORATION:	Pop Up Restaurant Company Corp.					
DOCUMENT NUMBER:	2 22 25 25 25 27 27					
The enclosed Articles of Amendment at	nd fee are submitted for filing.					
Please return all correspondence concer	ning this matter to the following:					
	A					
	Leslie Artie Name of Contact Person					
	Kendrick Law Group Firm/Company					
	630 N. Wymere Rd. Str 370 Address					
	Mai Hand, F2 32751 City/ State and Zip Code					
	·					
E-mail addr	leslie @ Kendrick law group. Com					
1maii adaix	233. (to be used to ratate annual report normeations)					
For further information concerning this	matter, please call:					
Leslie A	10- 00-00-00-00-00-00-00-00-00-00-00-00-0					
Name of Contact Person	at ( 407 ) 6A1-5847  Area Code & Daytime Telephone Number					
Englosed is a sheek for the following on						
. /	nount made payable to the Florida Department of State:					
S35 Filing Fee □\$43.75 Fil Certificate						
Mailing Address Amendment Section	Street Address Amendment Section					
Division of Corporation	ons Division of Corporations					
P.O. Box 6327 Tallahassee, FL 3231	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Ponl	In Restaurant Company Corp
(Name of Corporation as current	y filed with the Florida Dept. of State)
P 2200	000:50787
	f 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:	
	77
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 2 "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
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: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent	
(Florida str	eet address)
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 v	vith and accept the obligations of the position.
Signature of New R	egistered Agent, if changing
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)

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	_MBK	Leighton Brown	
Add Remove			
2) Change	MBR	Robert Burzynski	
Add		·	
Remove 3) Change	MBR	Travor Bryan	
Add		,	
<u> </u>			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			-
Remove			

(Attach aa	lditional sheets,	additional Arti , if necessary).	(Be specific)	<del></del>			
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If an ame	endment provid	des for an exch	ange, reclassifi	ication, or cane	ellation of issue	ed shares.	
<u>provisio</u> Gf m	ns for impleme ot applicable, it	enting the amer adicate N/A)	<u>ndment if not c</u>	contained in the	amendment it	self:	
(9)		,					
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						-	<del></del>

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The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this block document's effective date on the Depart	t does not meet the applicable statutory filing requirement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without	t shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were suffici	f by the shareholders. The number of votes cast for ent for approval.	the amendment(s)
	ed by the shareholders through voting groups. The h voting group entitled to vote separately on the am	_
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	(voting group)	,
	(voting group)	
Dated	1 2022	
Signature	James Velson	
(By a direct	or, president or other officer – it directors or officer	s have not been
selected, by	an incorporator – if in the hands of a receiver, trus	tee, or other court
appointed is	iduciary by that fiduciary)	
	(Typed or printed name of person signing)	
_	(Typed or printed name of person signing)	•
•	President	
<del></del>	(Title of person signing)	