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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: 504 COQUITO'S I	HONDURAS E	RESTAURA	NT AND BAR INC				
DOCUMENT NUM	P14000022744							
The enclosed Articles	s of Amendment and fee are su	bmitted for fili	ing.					
Please return all corre	espondence concerning this ma	tter to the folio	owing:					
	NICK FANELLA							
		Name of Co	ontact Person	1				
	NR FANELLA & CO							
	Firm/ Company							
	434 TANGLEWOOD DR							
		Ad	dress					
	FT WALTON BEACH FL 3.	2547						
		City/ State	and Zip Cod	e				
	NFANELLA@COX.NET							
	E-mail address: (to be us	sed for future a	nuual report	potification)				
For further information	on concerning this matter, plea	se call:	.850	862-7131 de & Daytime Telephone Number				
Name	of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check f	or the following amount made	payable to the	Florida Depa	artment of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified (Additional enclosed)	Copy Leopy is	Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Division The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

504 COQUITO'S HONDURAS RESTAURANT AND BAR INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P14000022744	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," 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>)	. 2
C. Enter new mailing address, if applicable:	5 T
(Mailing address MAY BE A POST OFFICE BOX)	
	
	<u> </u>
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida o	street address)
(1 tortua 3	ar etr ana ess)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
- ·	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)) (e), F.S.
☐ The amendment(s) was/were adopted by the incorporators, or be action was not required.	pard of directors without shareholder action and shareholder

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>ee</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Address</u>
1) Change	VP	_	JORGE ORTIZ	9902 THOMAS DRIVE
Add				PANAMA CITY FL 32408
X Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_	-	
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an excl	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
,	

. ` .

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 w document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statement must be separately provided for each 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)	
JANUARY 12, 2020 Dated Signature	
(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)	
ORACE MACIAS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	