Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H180000665783ABC8

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: BROTHERS MULTISERVICIOS

Account Number : I20180000001

Phone Fax Number : (954)300-1609 : (954)252-2487

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please. ***

BROTHERSMULTISERVICIOS@GMAIL.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN BML JUTIAPA RESTAURANT, INC

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COVER LETTER

Division of Cor			
NAME OF CORPO	DRATION: BML JUTIAPA R	ESTAURANT, INC	
	1BER: P17000015801	·-	18.18
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	ERIX BOTEO		
		Name of Contact Perso	n
	BML JUTIAPA RESTAURA	ANT, INC	
		Firm/ Company	
	23 NORTH ERIC CIRCLE		
	 	Address	
	LAKE WORTH, FL 33463		
		City/ State and Zip Cod	e e
BR	OTHERSMULTISERVICIOS(2GMAIL.COM	
		sed for future annual report	notification)
	•	•	,
For further informati	on concerning this matter, pleas	se call:	
ERIX BOTEO		at (786	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artinent of State:
□ \$35 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			Address
Amendment Section			lment Section
	vision of Corporations D. Box 6327		on of Corporations Building
	llahassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

(((H18000066578 3)))

Articles of Amendment to Articles of Incorporation of

ment(s) to	(Name of Corporation as currently filed with the Florida Dept. of State)
ment(s) to	
ment(s) t	0015801
ment(s) t	(Document Number of Corporation (if known)
	nt to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendeles of Incorporation:
	mending name, enter the new name of the corporation:
214°	ERIX BOTEO MULTISERVICES INC
ion	must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviat " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain chartered," "professional association," or the abbreviation "P.A."
_	er new principal office address, if applicable: pal office address MUST BE A STREET ADDRESS)
_ 1	ter new mailing address, if applicable: alling address MAY BE A POST OFFICE BOX) Mending the registered agent and/or registered office address in Florida, enter the name of the registered agent and/or the new registered office address:
	Name of New Registered Agent N/A
	(Florida street address)
	N/A
_	New Registered Office Address:
_	mending the registered agent and/or registered office address in Florida, enter the name of the registered agent and/or the new registered office address: Name of New Registered Agent N/A (Florida street address) N/A Florida

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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: X Change	PT	John Do	NC.		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Su	<u>nith</u>		
Type of Action (Check One)	Title		Name		Address
1) Change	N/A		N/A	-	N/A
Add					
Remove					
2) Change		_		-	
Add					
Remove					
3) Change		_		_	
Add					
Remove					
4) Change		_		_	
Add					
Remove					
5) Change				_	
Add					
Remove					
6) Change	-	_		-	
Remove					

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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) A	(Attach additional sheets, if necessary).	(Be specific)
(if not applicable, indicate N/A)	'A	
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(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·	
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
	(if not applicable indicate N/4)	ndment if not contained in the amendment itself:
A		
	A	

~	•	

To: DIVISION OF CORPORATION Page 7 of 7 2018-02-28 02:16:41 (GMT)

19542522487 From: JAIME GUZMAN

(((H18000066578 3)))

The date of each amendment(s) a	doption:	_, 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 t document's effective date on the Do	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach 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	(voling group)	
•	(voting group)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
2/27/2018 Dated		
Signature	FBAI	_
	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	
	ERIX BOTEO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	