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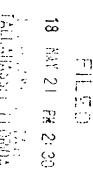
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MAY 23 2018 S. YOUNG



COVER LETTER

Division of Corporations NAME OF CORPORATION: Annabella Care Corp. P 17000093635. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marilin Rojas Hernandez.

Nume of Contact Person Annabella Cafe Corp.
Firm/Company Firm/ Company
600 W 27 ST.
Address Hideah FL 33010. Hailyn Feenandez 89@ Yahoo. com.
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Harilin Rosas Hernandez. at 786 715-6657.

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

, Articles of	of
Annabella Cafe C	ORD.
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P 170000 93635.	
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/R
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A:
	2: 30 16:00A
D. If amending the registered agent and/or registered office agent new registered agent and/or the new registered office addr	
	Rojas Hernandez
1/ 5/20/2	27 ST street address)
New Registered Office Address: MICYCUN	, Florida_ <u>33010 </u>
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent:
Signafur Lif Nev	z v Registered 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	PT John	<u>i Doc</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>P</u>	Ellises David Fernandez.	600 W 27 ST
Add			Hialent FL 33010.
Remove			
2) Change	5	gleyber Fernandez	600 W 27 ST
Add			Hialed FL 33010.
X _ Remove		1 1 0 11 0	
3) Change	<u>P·S</u>	Maeilin Rosas Hernandez	600 W 27 ST_
_ X _ Add			Hioleal, FL 33010.
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			Model
Remove			

<u>If amending</u> Attach <i>addit</i>	or adding addition ional sheets, if nece	<u>ial Articles, ento</u> ssary). – (Be spe	er change(s) he ecific)	<u>re</u> ;		
100%	Hazilin	Rojas	Herna	ndez:	· · · · · · · · · · · · · · · · · · ·	
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provisions	ment provides for for implementing t applicable, indicate	<u>he amendment j</u>	classification, o f not contained	r cancellation of in the amendme	fissued shares, ent itself:	
- - W/	'A:					
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The date of each amendment(s) adoption	5/	15/2018.	, if other than the
data this dammarant mas slanted	,		
Page 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1/15/2018		
Effective date <u>if applicable</u> :	(no more than 9)) days after amendment file d	ate)
			,
Note: If the date inserted in this block of document's effective date on the Departm		able statutory filing requirem	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adopted by the shareholders was/were sufficien		number of votes east for the	amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each			
"The number of votes east for the		, ,	
by	(voting group)	···	
	(voting group)		
The amendment(s) was/were adopted baction was not required.	by the board of directors	without shareholder action an	d shareholder
The amendment(s) was/were adopted by action was not required.	by the incorporators with	out shareholder action and sha	areholder
Dated5/15 Signature	12018 Janes		
(By a director	, president or other offic	er – if directors or officers ha	ve not been
	in incorporator – if in the uciary by that fiduciary)	hands of a receiver, trustee, of	or other court
·· 	1	as Heenande	h ·
	(Typed or printed r	iame of person signing)	·
	President	and Socretary	/
	(Title c	f person signing)	