

5/6/24, 11:17 AM

*Handwritten:* P21 000093501  
Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

((H24000164219 3))



H240001642193ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6380

From:  
Account Name : FLL BUSINESS SOLUTION CORP  
Account Number : I20190000092  
Phone : (754)202-8663  
Fax Number : (786)636-3620

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

Email Address: FLLbusiness@outlook.com

2024 MAY -6 AM 8:34

FILED

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ENANOS FOOD CORP

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

*Handwritten:* 2024 MAY -6 PM 2:07

Electronic Filing Menu

Corporate Filing Menu

Help

*Handwritten signature*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ENANOS FOOD CORP

**DOCUMENT NUMBER:** P21000093501

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

XIANNY CHINCHILLA  
Name of Contact Person

FLL BUSINESS SOLUTION CORP  
Firm/ Company

8350 W STATE ROAD 84  
Address

DAVIE, FL. 33324  
City/ State and Zip Code

FLLbusiness@outlook.com  
E-mail address: (to be used for future annual report notification)

2024 MAY -6 AM 8:34  
**FILED**

For further information concerning this matter, please call:

XIANNY CHINCHILLA at ( 754 ) 2028663  
Name of Contact Person 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 & 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**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

ENANOS FOOD CORP

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

P21000093501

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:  
*(Principal office address **MUST BE A STREET ADDRESS**)*

8690 GRAND CANAL DR

MIAMI, FL. 33144

C. Enter new mailing address, if applicable:  
*(Mailing address **MAY BE A POST OFFICE BOX**)*

8690 GRAND CANAL DR

MIAMI, FL. 33144

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent CAROLINA ARROYAVE VALENCIA

8690 GRAND CANAL DR

*(Florida street address)*

New Registered Office Address: MIAMI, Florida 33144  
*(City) (Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*Carolina Arroyave Valencia*

*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.

2024 MAY 16 AM 8:34  
FILED

FILED

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:

- Change                      PT      John Doe
- Remove                         V        Mike Jones
- Add                                SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	P	Carolina Arroyave Valencia Last Name: Arroyave Valencia	8690 Grand Canal Dr Miami, FL 33144
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	P	Marlon Y. Morales Hurtado	55 NE 5th Street Apt 4725 Miami, FL 33132
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	V	Carlos M. Medina	55 NE 5th Street Apt 4725 Miami, FL 33132
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	S	Jhonnatan F. Carvajal	55 NE 5th Street Apt 4725 Miami, FL 33132
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

2024 MAY -6 AM 8:34

FILED



The date of each amendment(s) adoption: 05/06/2024, if other than the date this document was signed.

Effective date if applicable: 05/06/2024  
*(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)*

Dated 05/06/2024

Signature Carlos M. Medina  
(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)

CARLOS M. MEDINA  
\_\_\_\_\_  
*(Typed or printed name of person signing)*  
VICEPRESIDENT  
\_\_\_\_\_  
*(Title of person signing)*

FILED  
 2024 MAY -6 AM 8:34  
 CARLOS M. MEDINA