## P11000035113

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: THE SECRET RECIPE CORP.  DOCUMENT NUMBER: P11000035113					
	of Amendment and fee are su				
Please return all corre	spondence concerning this ma	tter to the following:			
	VIVIAN SANCI	HEZ			
	Name of Contact Person THE SECRET RECIPE CORP				
136 SW 8TH STREET APT #2					
	MIAMI FL 3313	Address 30			
		City/ State and Zip Code			
viv	i2281c@gmail.	com			
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
VIVIAN SA	NCHEZ	<sub>at (</sub> 786	,3442098		
Name	of Contact Person		de & 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		Street Address Amendment Section			
Division of Corporations		Division of Corporations			

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

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

## Articles of Amendment to Articles of Incorporation

of

THE	SEC	RET	RECI	PF	CORP.
	SEU	$ abla \mathbf{r}_{\perp}$	NEU	$\Gamma$	CORE.

(Name of Corporation o	s currently filed with the F	larida Dant of Stata)	<del></del>
P11000035113	s currently inea with the P.	grad Dept. or State)	
	nt Number of Corporation (i	f known)	<del></del>
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this i	Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
CAROSA CORP.			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	n," "company," or "incorporated" or the Co". A professional corporation name mus P.A."	abbreviation
B. Enter new principal office address,	if applicable:	11260 NW 84TH ST	
(Principal office address <u>MUST BE A S</u>		DORAL FL 33178	<del>_</del>
C. <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>			SECRETARY OF STATE OF STATE OF STATE OF CORPUSAL OF CORPUSAL OF CORPUSAL OF THE
D. If amending the registered agent ar new registered agent and/or the ne			<b>-£</b>
Name of New Registered Agent	N/A		
New Registered Office Address:	(Florida stra	EET DORAL , Florida 33178	<u> </u>
New Registered Agent's Signature, if c I hereby accept the appointment as regis	(City)  Changing Registered Agent:  tered agent. I am familiar w	(Zip Code) vith and accept the obligations of the position	1.
Si	gnature of New Registered A	gent, 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove		N1/A	
3) Change	<del> </del>	<u>N/A</u>	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
N/A				
	<u> </u>			
				<del> </del>
	,			
			<del></del>	
<u> </u>	·			
			- <del></del>	
			·····	
F. If an amendment provides for a provisions for implementing the (if not applicable, indicate to N/A)	<u>e amendment if not</u>	fication, or cancellati contained in the ame	on of issued shares, ndment itself:	
<del></del>				<del> </del>
				·· <u></u>
				·····

The date of each amendment(s) adde this document was signed.	doption:	, if other than the
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	,
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by N/A	"	
- V	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_10/01	/2013	
(By a d selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)	
	VIVIAN SANCHEZ	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	

(Title of person signing)