547245

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SECRETARY OF STA

4/4/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>David's Ca</u>	afe, INC.	
DOCUMENT NUMBER: #547245	•	·
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
	fredo J. Gonzalez	
(Name	of Contact Person)	
(Fi	irm/ Company)	
5825	Collins Ave. Apt. 6-F (Address)	
	(Audress)	
	ni Beach, FL 33140 State and Zip Code)	
For further information concerning this matter,	, please call:	
Alfredo J. Gonzalez (Name of Contact Person)	at (305) 579-0588 (Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount r	made payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\sum \\$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 Clifton Building 2661 Executive Center Cir	rcle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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David's Cafe, INC). CECOCTANA	6
(Name of Corporation as currently filed with the	ne Florida DENE DESTATE	F STATE FLORIDA
#547245		
(Document Number of Corporation	on (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute following amendment(s) to its Articles of Incorporation:		corporation adopts the
A. If amending name, enter the new name of the corporation	<u>:</u>	
N/A The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co., "Co". A professional corporation name must contain association," or the abbreviation "P.A."	" or the designation "C	orp," "Inc," or
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent: N/A		r the name of the
New Registered Office Address: (Florid	da street address)	
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am joosition.	gent: familiar with and accept	the obligations of the
Signature of New	Registered Agent, if chan	ging

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Maria F. Gonzalez	5825 Collins Ave. Apt. PH-A Miami Beach, FL 33140	_
Р	Adrian Gonzalez	1401 Bay road, #208 Miami Beach, FL 33139	Add Remove
<u>VP</u>	Adrian Gonzalez	1401 Bay road, #208 Miami Beach, FL 33139	Add Remove
	adding or adding additional Articles, additional sheets, if necessary). (Be		
			,
<u> </u>	,		
<u>provis</u>		e, reclassification, or cancellation of is ent if not contained in the amendment	

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)

<u>Title</u>	Name .	<u>Address</u>	Type of Action
<u>s</u>	Maria F. Gonzalez	5825 Collins Ave. Apt. PH-A Miami Beach, FL 33140	
<u>P</u>	Alfredo Gonzalez	5825 Collins Ave. Apt. PH-A Miami Beach, FL 33140	
VP	Alfredo J. Gonzalez	5825 Collins Ave. Apt. 6-F Miami Beach, FL 33140	Add Remove
	nding or adding additional Articles, additional sheets, if necessary). (Be		
N/A		•	
provi		ze, reclassification, or cancellation of ent if not contained in the amendmen	
N/A			

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)

<u>Title</u> · ·	Name	Address	Type of Action
<u>s</u>	Alfredo Gonzalez	5825 Collins Ave. Apt. PH-A Miami Beach, FL 33140	
			_
	,		
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
N/A			
<u>provisi</u>	mendment provides for an exchang ions for implementing the amendment applicable, indicate N/A)	e, reclassification, or cancellation of ent if not contained in the amendmen	issued shares, it itself:
N/A			

Тh	e date of each amendment(s) adoption: 4-8-09
Eft	fective date if applicable: File Date.
	(no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHECK ONE)
☑	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"
	by" (voting group)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated April 8, 2009
	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)
	Maria F. Gonzalez
	(Typed or printed name of person signing)
	VP
	(Title of person signing)