G02070

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SEP 15 AN 10: 38

SEP 2 2 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CECCI	CAFETERIA AND I	PRODUCE, INC.	
DOCUMENT NUMBER: G02070			
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning t			
Frease return an correspondence concerning t	ins matter to the following.		
CHRISTIAM	CARDENAS, ESQ.		
101110 4 011	Name of Contact Person	1	
LOUIS A. SU	PRASKI, P.A.		
2450 NE MIA	Firm/ Company AMI GARDENS DR.	2ND FLOOR	
	Address		
MIAMI, FL 33		,	
	City/ State and Zip Cod	e	
	PRASKILAW.COM		
E-mail address: (t	to be used for future annual report	notification)	
For further information concerning this matter, please call:			
LOUIS A. SUPRASKI, ESC	Q. at (305	, 792-0060	
Name of Contact Person	Area Co	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 F Certificate of St		□\$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	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation

博 SEP 15 AN 10: 39

CECCI CAFETERIA AND PRODUCE, INC. (Name of Corporation as currently filed with the Florida Dept. of State); G02070 (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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: Florida,

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

Signature of New Registered Agent, if changing

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

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	<u>Name</u>	<u>Addres</u> s
1) Change	PD	LUIS G ANGEL	19355 TURNBERRY WAY
Add			APT. 21E
Remove			AVENTURA, FL., 33180
2) Change	PD	ANGELA M ARISTIZABAL	19355 TURNBERRY WAY
Add			APT. 21E
Remove			AVENTURA, FL., 33180
3) Change	SVD	DANIELA ANGEL	19355 TURNBERRY WAY
Add			APT. 21E
Remove			AVENTURA, FL., 33180
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

A	l sheets, if necessar	y). (Be specific)			
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[6 an a	it provides for an c	<u>excnange, reclassii</u> amendment if not	<u>(ICALION, OF CANCE)</u>	lation of issued si	nares.
If an amendmen	icable indicate N/A	()	condition in the b	menument usen.	
If an amendmen provisions for (if not appl	icable, malcale M/A				
(if not appl	icable, malcule N/A				
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(if not appl	ecubie, indicate NyA				
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(if not appl	ecubie, indicute 147A				
(if not appl	ecubie, indicute 147A				
If an amendmen provisions for (if not apple)	ecubie, indicute 147A				
(if not appl	ecubie, indicute 147A				

The date of each amendment(s) ad date this document was signed.	option:	_, 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 ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	SEPTEMBER 8, 2014	
(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 ted fiduciary by that fiduciary)	_
	ANGELA M. ARISTIZABAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	···