N10000008767

, (Re	equestor's Name)	
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(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION: Mission Bread	d Hospitality, Inc.	
DOCUMENT NU	мвек: N10000008767		
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
-	No	rma Vega	
	. (Name o	f Contact Person)	
_	(Firr	m/ Company)	
	5363 Da	hlia Reserve Dr	
	((Address)	
	Kissimr	mee, FL 34758	
	(City/ Sta	ate and Zip Code)	
		hosp@hotmail.com	
	•	ed for future annual report notific	cation)
For further informa	tion concerning this matter, pleas	se call:	
Norma Vega		at (407) 247-69 ⁻ (Area Code & Dayti	19
(Nan	ne of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check	for the following amount made	payable to the Florida Departmer	nt of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div	niling Address nendment Section vision of Corporations D. Box 6327	Street Address Amendment Section Division of Corporati Clifton Building	
	Inhacea El 22314	2661 Executive Cente	r Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILEU

2011 AUG -1 PM 4: 13

Mission Brea	d of Hospitality, Inc.	SECRETARY OF STATE
(Name of Corporation as curre	ntly filed with the Florida D	ept. of Store) AHASSEE, FLORIDA
	000008767	**************************************
(Document Num	ber of Corporation (if known	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of Inc.		Not For Profit Corporation adopts
A. If amending name, enter the new name of	the corporation:	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" or		
B. Enter new principal office address, if appl (Principal office address MUST BE A STREE)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
D. If amending the registered agent and/or renew registered agent and/or the new regis		lorida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street addi	ress)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered position.		and accept the obligations of the
Si	onature of New Registered A	pent if changing

Page 1 of

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)

t

<u>Title</u>	Name	Address	Type of Action
Sec	Diana Pagan	507 Sinch Lane Kissimmee, FL 34759	
Tres	Ruth R Gonzalez	380 Coco Ct Kissimmee, FL 34758	
FD	James Gutierres	14910 Crane Nes Ct Orlando, FL 32824	
E. If amer	nding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	

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
Sec	Figueroa, Thelma J	P. O. Box 1295 Orlando, FL 32802	□ Add ☑ Remove
Tres	Deltoro, Angel	2727 W. Oakridge Rd Bldg 6 Apt 4 Orlando, FL 34758	_ □ Add _ ☑ Remove
FD	Contreras, Nelly	2334 Huntington Green Crt Orlando, FL 32839	□ Add ☑ Remove
	ding or adding additional Articles, additional sheets, if necessary). (Be		64,23
	engen en e	M	

The date of each amendmen	t(s) adoption: 7/26///
,	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
hav	the chairman or vice chairman of the coard, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Norma I. Vega
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

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