## P02000020422

(Re	equestor's Name)	<u> </u>
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(Cit	ty/State/Zip/Phone	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION:	NATIVE CO	LOMBIAN RESTA	URANT INC	
DOCUMENT NU	NT NUMBER:P02000020422				
The enclosed Artic	cles of Amendme	ent and fee are	submitted for fili	ng.	
Please return all co	orrespondence co	ncerning this n	natter to the follo	wing:	
		JORGE P	ERDIGON		
		(Name of C	Contact Person)		
	NATI	/E COLOMBIAN	RESTAURANT IN	NC	
		(Firm/	Company)		
			N 8TH ST		
		(A)	ddress)		
<del></del>			FL 33130		
For further inform	ation concerning	•	and Zip Code)		
MANUEL MUNOZ			at (_305	300-6837	
(Nam	e of Contact Person)	,	(Area Cod	le & Daytime 7	elephone Number)
Enclosed is a chec	k for the followir	ng amount:			
☑ \$35 Filing Fee	☐ \$43.75 Filing Certificate o		□ \$43.75 Filing I Certified Copy (Additional co enclosed)	/	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address endment Section			Address ment Section	1
Div	ision of Corporate. Box 6327		Divisio	n of Corpora Gaines Stree	itions

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

		of	A
	NATIVE COLO	MBIAN RESTAURANT, INC	APR LATE
(Nar	ne of corporation as curren	ntly filed with the Florida Dept. of State	ASSE
	PO	2000020422	PH 12: 29 FE. FLORI
	(Document numb	er of corporation (if known)	— روز <b>المنابعة</b>
Pursuant to the provisions adopts the following amen	ndment(s) to its Articl	Florida Statutes, this <i>Florida Pro</i> es of Incorporation:	
NEW CORTORATE NA	ivie (ii changing).		
		corporated" or the abbreviation "Corp., "ered", "professional association," or the	
AMENDMENTS ADOP and/or Article Title(s) bei		AN NAME CHANGE) Indicate And deleted: (BE SPECIFIC)	Article Number(s)
ARTICLE IX: JOHN S. MO	LOY RESINGS AS PR	ESIDENT	
JORGE PERDIGON, 981	W 8TH STREET, MIAI	MI, FL 33130 IS NAMED PRESIDEN	IT
JOHN S. MOLLOY RESIG	NS AS REGISTERED	AGENT. JORGE PERDIGON IS NA	.MED
NEW REGISTERED AGE	NT.		
			<del></del>
			1 10 100
	(Attach additi	onal pages if necessary)	
		ification, or cancellation of issued in the amendment itself: (if not	
SHARES OWNERSHIP AS	FOLLOWS: JORGE P	ERDIGON: 100%	

(continued)

The date of each an	iendment(s	adoption: A	PRIL 11, 2005	
Effective date if app	olicable: (	no more than 90 o	days after amendment file date)	
Adoption of Amend	ment(s)	( <u>CHECK</u>	ONE)	
			ved by the shareholders. The number of votes casers was/were sufficient for approval.	st for
following		iust be separai	yed by the shareholders through voting groups. The tely provided for each voting group entitled to voting group entitled	
"The	number of v	otes cast for th	te amendment(s) was/were sufficient for approva	ıl by
		-117 yr.	(voting group)	
☑ The amer and share	dment(s) w holder actio	as/were adopte n was not requ	ed by the board of directors without shareholder a ired.	action
		as/were adopte as not required	ed by the incorporators without shareholder actio	n and
Signed this 11TH	day of	APRIL		
Signa	selected	ector, president of l, by an incorpora ed fiduciary by th	r other officer - if directors or officers have not been tor - if in the hands of a receiver, trustee, or other court at fiduciary)	
			OHN S. MOLLOY	
		(Typed	or printed name of person signing)	
			PRESIDENT	
			(Title of person signing)	

FILING FEE: \$35

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

Native Colombian Restaurant, Inc.

2. The name and address of the registered agent and office is:

Jorge Perdigon 981 SW 8<sup>th</sup> Street Miami, FL 33130

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. OR IF THIS DOCUMENT IS BEING FILED MERELY TO REFLECT A CHANGE IN THE REGISTERED OFFICE ADDRESS, I HEREBY CONFIRM THAT THE CORPORATION HAS BEEN NOTIFIED IN WRITING OF THIS CHANGE.

SIGNATURE

DATE