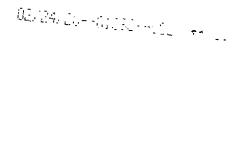
# PO2 000 104914

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Name)
(Document Number)
(Eccument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500340925565



FILED

20 FEB 24 PHIP: 12

# **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	XIE SUBWAY CORP.
DOCUMENT NUMBER:	7000104914
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
MANI	IEL HATTINEL SOUR
	Name of Contact Person
<u> </u>	SWAY/CANTINK GILL
1075	Firm/ Company
	05W 128AUE.
_	HAHI, FL 33186
	City/ State and Zip Code
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	· .
MANUEL HATTINEZ Name of Contact Person	SONR at (786) 344-3020 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee Certificate of State	, ,

# Mailing Address

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

# Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **Articles of Amendment** to

Articles of Incorporation of

DIXIE SUBW	SY COEP.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P0 20001	04914
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
GABLES CANTINA CO	R POSATION The new
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	: N
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	·
	4
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	<u> </u>
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
The transfer of the second sec	
(Florida stree	ri address)
Vina Diminion (1700) and (111)	M2.J.,
<u>New Registered Office Address;</u> 10	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Reg	gistered Agent, if changing
Check if applicable	a re
$\Box$ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e	$J_{i}(1)$ . $J_{i}(1)$

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>	Address
!) Change			
Add			
Remove			<u> </u>
2) Change			
Add			N
Remove 3.) Change			
Add			7 72
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	cles, enter change(s) here:  (Be specific)
.,	
	$\sim$
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	19 12

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ 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	20 F
by	8 7
(voting group)	12 =
Dated	FH R: 12
(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)	
(Typed or printed name of person signing)	OHE
OWNER	
(Title of person signing)	