2020 DEC - 3 PH 1: 30



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(((H20000413260 3)))



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To:

Division of Corporations Fax Number : (850)617-6380

From:

 Account Name
 : CAPITOL SERVICES, INC.

 Account Number
 : 120160000017

 Phone
 : (855)498-5500

 Fax Number
 : (800)432-3622

.

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

:222

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE JAVA BUTLER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

COVER LETTER

TO: Amondment Section Division of Corporations			
NAME OF CORPORATION:	he	Java	Butler Inc
DOCUMENT NUMBER:			

The enclosed Articles of Amendment and fee are submitted for filing.

Please roturn all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

HERMOGENES MORIE AU at (239) 850-1170 Area Code & Daytims Telephone Number Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

🖸 \$35 Filing Fee

S43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & □\$52.50 Filing Fee 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** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

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Articles of Amendment		
to		
Articles of Incorporation		
of		
THE TAVA BUTTLES INI		
(Name of Corporation as currently filed with the Florida Dept. of State)		
(Document Number of Corporation (if known)		
Demonstrate and the second state of the stat		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follo its Articles of Incorporation:	wing amendment(s) to	
A. If amending name, enter the new name of the corporation;		
TICO Maleno Coffee Inc	The new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev	iation "Corp.,"	
"Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must co. "chartered." "professional association." or the abbreviation "P.A."	ntain the word 2020 DEC	
B. Eater new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	DEC	
	ů	•
	·P	11
C. C. A	PM	$\overline{\Box}$
C. Eater new mailing address, if applicable: (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 office address:		
Name of New Registered Agent		
	·	
(Florida street address)		
New Registered Office Address:		
(Civy)	Zip Code)	
<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positiv	on.	

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.



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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 Officers and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

John Doc

<u>PT</u>

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.

| <u>X</u> | Change |
|----------|--------|

| X Remove                             | ¥            | <u>Mike J</u> | <u>enez</u> |                                       |          |                  |
|--------------------------------------|--------------|---------------|-------------|---------------------------------------|----------|------------------|
| <u>X</u> Add                         | <u>\$Y</u>   | Sally S       | mith        |                                       | ~        |                  |
| <u>Type of Action</u><br>(Check One) | <u>Title</u> |               | Name        | Address                               | 2020 DEC |                  |
| I) Change                            | ·            | <u> </u>      | ·····       |                                       | 1        | مو ہے۔<br>موسد ہ |
| Add                                  |              |               |             |                                       | ່ ພ<br>  |                  |
| Remove                               |              |               |             |                                       | - PH     |                  |
| 2) Change                            |              | _             |             |                                       | : 30     |                  |
| Add                                  |              |               |             |                                       |          |                  |
| Remove                               |              | -             |             |                                       | -        |                  |
| Add                                  |              |               |             |                                       | -        |                  |
| Remove                               |              |               |             | · · · · · · · · · · · · · · · · · · · | -        |                  |
| 4) Change                            |              | -             |             |                                       | -        |                  |
| Add                                  |              |               |             | ·                                     | _        |                  |
| Remove                               |              |               |             |                                       |          |                  |
| 5) Change                            | <u> </u>     | -             |             |                                       | _        |                  |
| Add                                  |              |               |             |                                       | _        |                  |
| Remove                               |              |               |             | <u>-</u>                              |          |                  |
| 6) Change                            | <u> </u>     | -             |             |                                       |          |                  |
| Add                                  |              |               |             |                                       | -        |                  |
| Remove                               |              |               |             |                                       | -        |                  |

| E. | If amending or adding additional Arti     | cles, enter change(s) here: |
|----|-------------------------------------------|-----------------------------|
|    | (Attach additional sheets, if necessary). | (Be specific)               |

|                                   | -           | 2020 DEC - 3 PM 1: 30 |  |
|-----------------------------------|-------------|-----------------------|--|
| ([f not applicable, indicate N/A) | -<br>-<br>- |                       |  |

| The date of each amendment(s) adoption:                                                                                                                                                                     | if other than the    |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----|
| •                                                                                                                                                                                                           |                      |     |
| Effective date if applicable:                                                                                                                                                                               |                      |     |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.                       | 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 and s action was not required.                                                                   | hareholder           |     |
| 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<br>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                                                                                                                             | 202                  |     |
| by"                                                                                                                                                                                                         | 0 DE                 |     |
| (voling group)                                                                                                                                                                                              | <br>                 | • - |
| Dated 09/27/2020<br>Signature                                                                                                                                                                               |                      |     |

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