P03000132487

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(Document Number)
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2021 SEP 17 PH 1: 21

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COVER LETTER

TO: Amendment Section Division of Corporations

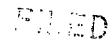
NAME OF CORPO	RATION: LA PLACITA MI	NIMARKET INC.		
DOCUMENT NUM	BER: P03000132487			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	INGRIS DEL RIO			
		Name of Contact Person	l	
	LA PLACITA MINIMARKE	ET INC.		
		Firm' Company		
	3950 LAKE WORTH RD			
	<u></u>	Address		
	LAKE WORTH, FL 33461			
		City/ State and Zip Code		
For further information	E-mail address: (to be us) 6 mail. Com notification)	
	ris Del Rio	at (561) 951-2188 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	ertment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



LA PLACITA MINIMARKET INC.			2021 SEP 17 PH 1: 21
(Name o	of Corporation as currently	filed with the Florida Dep	t. of State)
P03000132487			6.24. 1. 1.25 6.24.24.
	(Document Number of	Corporation (if known)	TYPEL TESTATE
Pursuant to the provisions of section 607. (s Articles of Incorporation:		-	dopts the following amendment(s)
. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co". A	ompany," or "incorporated" professional corporation n	or the abbreviation "Corp.,"
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>			
Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)		
			6.1
 If amending the registered agent an new registered agent and/or the new 	<u>id/or registered office addr</u> w registered office address:	<u>ess in Florida, enter the na</u>	me of the
	INGRIS DEL RIO	•	
<u>Name of New Registered Agent</u>			
	4518 OAK TERRACE DR		<u></u> _
	(l-lorida stre	ret address)	
New Registered Office Address:	GREENACRES		_, Florida
		(Ciţy)	(Zip Code)
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar w	: ith and accept the obligation	ns of the position.
	Ingus Des	egistered Agent, if changing	
	Signature of New Re	gistered Agent, if changing	
	,		

Check if applicable

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

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)

Example:

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe			
X Remove	$\underline{\mathbf{V}}$	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	P	ALBA, HECTOR ARISTIDES	3950 LAKE WORTH RD		
Add			LAKE WORTH, FL 33461		
X Remove					
2) Change	VP	ROBERT ALBA	3950 LAKE WORTH ROAD		
X Add			LAKE WORTH, FL 33461		
Remove 3) X Change	P	DEL RIO. INGRIS	3950 LAKE WORTH ROAD		
Add			LAKE WORTH, FL 33461		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirent Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	pproved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amend	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
SEPTEM Dated	BER 3. 2021	
selec	director president or other officer – if directors or officers had by an incorporator – if in the hands of a receiver, trustee, inted fiduciary by that fiduciary)	
	INGRIS DEL RIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	