P04000011872

(Re	equestor's Name)			
(Ad	dress)			
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. (Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL .		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
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Amend 109.17,13

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Division of Corporations
NAME OF CORPORATION: COFFEE Shop Santa Barbara Coep
DOCUMENT NUMBER: P04/0000/7872
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
OURELY MOINA. Name of Contact Person
Name of Contact Letson
Firm/ Company
5862 in flaster st.
S862 W FIRST ST. WIAMI FI 33144 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (786) 373-1391. Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
Certificate of Status S43.75 Filing Fee & Certificate of Status
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

COFFEE Shop SAN-1A BARBARA COEP	
(Name of Corporation as currently filed with the Florida Dept. of State)	
D04000017872.	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	breviation ontain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>جم</u> <u>ن</u>
	3 25
	- B 15
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	是是
Name of New Registered Agent	ر از استون از مید از است
	,
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

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	PT John	Doe			
X Remove	<u>V</u> <u>Mike Jones</u>				
X Add	SV Sally	Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	PD	Aguirre, Ernesto			
Add					
Remove					
2) Change	PD	MOLINA, Surely			
<u> </u> Add	·				
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5 1 Ol					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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an amendment provides for an e rovisions for implementing the a	mendment if not cont	ained in the amendm	nent itself:
(if not applicable, indicate N/A			
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	<u></u>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
☐ 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	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/36/2013 - Signature ERNeste form	
Signature ERNeste ASVIV	
(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, trustec, or other court appointed fiduciary by that fiduciary)	_
(Typed or printed name of person signing)	_
(Title of person signing)	<u> </u>
(Title of person signing)	