# P0400078964

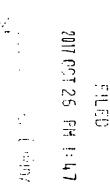
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C GOLDEN
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Gibarito Distributo	ors Corp	
DOCUMENT NUME	BER: P04000078964		<del></del>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Francisca De La Torre		
		Name of Contact Person	n
	·Bibarito Distrib	2)tous Corp	
		Firm/ Company	
	4805 E 10th Ave.		
		Address	<del></del>
	Hialcah, FL 33013		
	<del></del>	City/ State and Zip Code	e
		Only orace and raip on a	_
For further information	E-mail address: (to be us	sed for future annual report	notification)
Francisca De La Torre	:	at (	904-1206
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi	ling Address Indment Section Is a sion of Corporations Is a same same same same same same same s	Amend Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation

FILCO

2017 OCT 26 PN 1:47

## Articles of Incorpor of GIBARITO DISTRIBUTORS CORP

(Name o	of Corporation as current	ly filed with the Florida Dept.	. of State)	
P04000078964			· (1)	ACHREL :
	(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ad	opts the following a	ımendment(s) to
A. If amending name, enter the new na	me of the corporation:			
			7	he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	'Co". A professional corpora	rated" or the abbi	reviation ntain the
B. Enter new principal office address,				<u>.</u>
(Principal office address MUST BE A S	TREET ADDRESS )			
C. Enter new mailing address, if appli	cable:			
(Mailing address MAY BE A POST)	OFFICE BOX)			
D. If amending the registered agent an new registered agent and/or the new			e of the	
Name of You Registered Agest	FRANCISCA DE LA TO	RRE		
Name of New Registered Agent	4805 E 10TH AVE,	<del></del>	<del></del>	
		reet address)		
	HIALEAH	·	33013	
New Registered Office Address:		(Cirv)	, Florida	<u></u>
		,		,
New Registered Agent's Signature, if c				
I hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations	of the position.	
	6/ //	1		
المراث ال	Tea de la			
		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	<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>	<u>Addres</u> s
1) Change	P	JOAQUIN VALDES	4805 E 10TH AVE
Add			HIALEAH, FL 33013
X Remove			
2) Change	PT	FRANCISCA DE LA TORRE	4805 E 10TH AVE
X Add			HIALEAH, FL 33013
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>additional</i>	sheets, if necessary).	(Be specific)			
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an amendment provisions for in	provides for an exch nplementing the ame	iange, reclassifica ndment if not con	tion, or cancellate tained in the ame	ion of issued shar indment itself:	<u>'es,</u>
	cable, indicate N/A)	•			
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. <u> </u>					

	otion:	, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blod document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date vertment of State's records.	vill not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	wed by the shareholders through voting groups. The following statement such 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)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated 11/2/	<u>'17</u>	
Signature 2	ctor, president or other officer – if directors or officers have not been	
selected.	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
	TYPED OF PRINTED PARTY OF PERSON SIGNING)	
	(Typed or printed name of person signing)	
	<i>V</i> .	·
	(Title of person signing)	