P04000/70389

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TO: Amendment Section Division of Corporations NAME OF CORPORATION: Los Amigos Dos, Inc. P04000170389 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for tiling. Please return all correspondence concerning this matter to the following: Curran K. Porto, PA Name of Contact Person Southern Elder Law Firm/ Company 410 S. Ware Blvd., Suite 105 Address Tampa, FL 33619 City/ State and Zip Code curran@southernelderlaw.center E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813-) 626-0088 Area Code & Daytime Telephone Number Curran K, Porto Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

Articles of Incorporation

Los Amigos Dos, Inc.	•/
(Name o	(Corporation as currently filed with the Florida Dept. of State)
P04000170389	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new na	me of the corporation:
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	The new tain the word "corporation," "company," or "incorporated" or the abbreviation ation "Corp," "Inc," or "Co". A professional corporation name must contain the tion," or the abbreviation "P.A."
B. Enter new principal office address, (Principal office address MUST BE A S	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, enter the name of the v registered office address:
Name of New Registered Agent	Curran K. Porto, PA
	410 S. Ware Blvd., Suite 105
	(Florida street address)
New Registered Office Address:	Tampa Florida 33619
	(City) (Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar with and accept the obligations of the position.
	02/
	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)

f

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Leonardo Rodriguez	404 Patricia Ave.
Add			Dunedin, FL 34698
X Remove			
2) Change	VP	Juan Hernandez Rodriguez	404 Patricia Ave.
Add			Dunedin, FL 34698
x Remove			
3) Change	Р	Juan Hernandez Rodriguez	404 Patricia Ave.
<u>x</u> Add	-		Dunedin, FL 34698
Remove			
4) Change	VP	Nubia Esperanza Rivas	404 Patricia Ave.
X Add			Dunedin, FL 34698
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
-		
· 		
-		
		
		-
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

. . . .

The date of each amendment(s) adoption:	10-1-18	, if other than the
date this document was signed.	9-1-18	
Effective date <u>if applicable</u> :	(no mare than 90 days after amendment	file date)
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing required to f State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient f	the shareholders. The number of votes cast for approval.	or the amendment(s)
The amendment(s) was/were approved by must be separately provided for each voi	y the shareholders through voting groups. The ting group entitled to vote separately on the a	e following statement mendment(s):
"The number of votes cast for the a	mendment(s) was/were sufficient for approval	
by	(voting group)	
		ion and shareholder
Li The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder act	ion and anarchoider
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action a	and shareholder
. Dated 10/26/	1/A	
5:		
selected, by/an	president or other officer - if directors or officincorporator - if in the hands of a receiver, tractary by that fiduciary)	ers have not been astee, or other court
(Juan Hernander Ro	odriguez
	(Typed of printed name of person signing)	n+
	(Title of person signing)	