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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TACO MOBIL CO	·RP, 			
DOCUMENT NUME	BER:				
The enclosed Articles	of Amendment and fee are sub	omitted for filing,			
Please return all corres	spondence concerning this mat	ter to the following:			
	MELINA ZAMARRIPA				
	<del></del>	Name of Contact Person	<u> </u>		
	TACO MOBIL CORP.				
	Firm/ Company				
	100 S ORANGE STREET				
	Address				
	FELLSMERE, FL 32948				
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e		
MELI	NAGOMEZ335@GMAIL.CC	OM .	,		
-	E-mail address; (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
MELINA ZAMARRIPA			de & Daytime Telephone Number		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	ertment of State:		
□ \$35 Filing Fee	□\$43.75 Fiting 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 P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TACO MOBIL CORP.			
(Name of Corporation as	currently filed with	the Florida Dept, of State)	
P06000088408			
(Document N	Sumber of Corporatio	n (if known)	
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	utes, this <i>Florida Pro</i>	fit Corporation adopts the fo	llowing amendment(s)
A. If amending name, enter the new name of the corpora	ation:		
			The new
name must be distinguishable and contain the word "co"Corp.," "Inc.," or Co.," or the designation "Corp.," "hword "chartered," "professional association," or the abbre	nc," or "Co". A pre		the abbreviation
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	<u>S</u> )		1
	-		7
		-	- <del>1                                   </del>
C. Enter new mailing address, if applicable:			7 19 1
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			ा <u>ण</u> - <del>ब्यु क्रिक</del>
			~ ~
		<u> </u>	
<ul> <li>If amending the registered agent and/or registered of new registered agent and/or the new registered office</li> </ul>		ida, enter the name of the	
	<u>caddress.</u>		
Name of New Registered Agent			
(1	Florida street address)		
New Registered Office Address:		Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:		
I hereby accept the appointment as registered agent. I am,		rept the obligations of the pos	ition.
Signature	of New Registered A	gent, if changing	<del></del>

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

Example: X Change	PT	John De	<u>oe</u>		
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title		Name	<u>Addres</u> s	
1) Change	Р		JAVIER ZAMARRIPA	100 S ORANGE STREET	
Add				FELLSMERE, FL 32948	
X Remove					
2) Change		_			
Add					
Remove					
3.) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
	<u> </u>		
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<u>.</u>			
<del> </del>			
<u></u>			
	·· <del>···</del>	<del></del>	
If an amendment provides for an exch	ange, reclassification, or ca	ncellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	idment if not contained in t	ne amendment itself:	
<del></del>		·	
<u> </u>			

The date of each amendment(s) a	idoption:	, if other than th
date this document was signed.	•	
06/ Effective date <u>if applicable</u> :	07/2017	
incerve date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we epartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
bv _		
	(voting group)	
☐ The amendment(s) was/were at action was not required.	lopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
06/07/20	17	
DatedSignature	Place Omare	
select	director, president or other officer – if directors or officers have not been ed. by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	MELINA ZAMARRIPA	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	