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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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APPROVED AND FILED

C. LEWIS

OCT 2 3 2013

EXAMINER

COVER LETTER

TO: Amendment Secti Division of Corpo				
NAME OF CORPOR	ATION: LA BAMBA	II, INC.		
DOCUMENT NUMB	P0700003221	2		
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:		
	JAIME MARTINE	Z		
•		Name of Contact Person	1	
	MARIMBA COCI	NA MEXICANA	II, INC	
		Firm/ Company	***************************************	
,		Address		
	TITUSVILLE, FL	32780		
		City/ State and Zip Cod	e	
JAI	MECINC@AOL.0	СОМ		
		sed for future annual report	notification)	
For further information	concerning this matter, plea	se call:		
JAIME MART	TINEZ	_{at (} 321	795-1817 de & Daytime Telephone Number	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:	
■ \$35 Fiting 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)	
	ing Address		Address	
Amendment Section Division of Corporations		Amendment Section		
	Box 6327	Division of Corporations Clifton Building		
	hassee, FL 32314		xecutive Center Circle	
			ssee. FL 32301	

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation of

LA BAMBA II, INC	
(Name of Corporation as currently filed with the F	lorida Dept. of State)
P07000032212	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MARIMBA COCINA MEXICANA II, INC.	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered of fice address	
Name of New Registered Agent	
(Florida sır	reet address)
New Registered Office Address:	. Florida
(City)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Signature of New Registered A	เยียน แ ตลเซเทร

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u></u>		
Add			
Remove			
2) Change			
Add			
Remove			
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Add			·
Remove			
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6) Change			
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(Attach additiona	dding additional Ar l sheets, if necessary).	(Be specific	<u></u>			
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If an amendmer	it provides for an exc	change, reclas	sification, or ca	ncellation of iss	ued shares,	
provisions for (if not appl	implementing the amicable, indicate N/A)	rendment if no	ot contained in	the amendment i	tself:	
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SECRETARY OF STATE
TALLAHASSEE, FLORID OCT 1, 2013 The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) (CHECK ONE) Adoption of Amendment(s) ■ 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. OCT 1, 2013 Signatur (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, trustee, or other court appointed fiduciary by that fiduciary) JAIME MARTINEZ (Typed or printed name of person signing) **PRESIDENT** (Title of person signing)