P07000050778

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: IL MIO PANE, IN	C.			
DOCUMENT NUMB	P07000050778				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	IL MIO PANE, INC.				
•	Name of Contact Person				
-	Firm/ Company				
	11795 SW 18th Street AP₹	3			
•	M	Address			
	Miami, FL 33175	0: /0: 17: 0.1			
		City/ State and Zip Code	<u>'</u>		
	arielbravo38@hotmail.com				
•	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Ariel Bravo		at (733-0539		
Name o	f Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	■\$43.75 Filing Fcc & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address Indigent Section Ission of Corporations Box 6327 Inhassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

(<u>Name</u> e	of Corporation as currently	filed with the Florida	Dept. of State)	·
IL MIO PANE, INC				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporati	ion adopts the followi	ng amendment(s) t
A. If amending name, enter the new n	ame of the corporation:			
MANOLO COFFEE & BAKERY, COR	P.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association."	Corp." "Inc," or "Co". A			ion "Corp.,"
B. Enter new principal office address, if applicable:			<u> 28.</u>	<u> </u>
(Principal office address MUST BE A S	TREET ADDRESS)	N/A	AS	124
			E. C.	m or
			<u> </u>	
C. Enter new mailing address, if appl		N/A	OR	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		7	<u>r. 01</u>
D. If amending the registered agent an new registered agent and/or the ne			e name of the	
Name of New Registered Agent				
Name of New Registered Agent	N/A			
	(Florida str	eet address)		_
N D : 100 411	N/A		P1: J-	
New Registered Office Address:		(City)	Florida /Zu	Code)
New Registered Agent's Signature, if a I hereby accept the appointment as regis	changing Registered Agent: tered agent. I am familiar v	: vith and accept the oblig	gations of the position	
	Signature of New R	egistered Agent, if chang	ging	 -
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

Example:

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.

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) N/A Change	N/A	N/A	N/A	-
Add				-
Remove				
2) Change		_		-
Add				-
Remove Change			2022 JUN	
Add			S. 2	
Remove			m=: ••••••••••••••••••••••••••••••••••••	
4) Change			FLORIDZ	0
Add			IDA 6	-
Remove				
5) Change				_
Add				_
Remove				
6) Change		_		_
Add				-
Remove				

	 					
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					-118	
F. If an amendment	nrovides for an excl	hange, reclassi	lication, or cancell	ation of issued share	•	
provisions for in	plementing the amountle, indicate N/A)				<u> </u>	
					· · ·	
			$\frac{1}{2}$			
			10/4)			

	06/10/2022		
The date of each amendment(s) adoption date this document was signed.	:	_, if othe	r than the
06/10/2022			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		_
	tho more than 90 days after amenament five date;		
Note: If the date inserted in this block do document's effective date on the Departme	ses not meet the applicable statutory filing requirements, this date will rent of State's records.	not be lis	ted as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by action was not required.	with the incorporators, or board of directors without shareholder action and s	harehold	ег
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.	2022	
	by the shareholders through voting groups. The following statement oting group entitled to vote separately on the amendment(s): amendment(s) was/were sufficient for approval	2022 JUN 24 PM	FILE
by	(voting group)	94:1 H	
Dated		· თ	
selected, by ar	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court sciary by that fiduciary)		
ARIE	L BRAVO		
	(Typed or printed name of person signing)		-
PRES	IDENT		
	(Title of person signing)		_