P08000004170

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to I	Eiling Officer	
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SECRETARY OF STATE

Amend
Brown 8-18-11

COVER LETTER

TO: Amendment Section Division of Corporation's

NAME OF CORPORATION: _	AME OF CORPORATION: EL MORRO CUBAN CUISINE CORP				
DOCUMENT NUMBER:	P0800004170				
The enclosed Articles of Amenda	nt and fee are submitted for filing.				
Please return all correspondence of	ncerning this matter to the following:				
	ZULIMA DEL CARMEN CHAVEZ				
	Name of Contact Person				
	EL MORRO CUBAN CUISINE CORP.				
	Firm/ Company				
	5555 GOLDEN GATE PKWY, #121				
	Address				
	NAPLES, FL 34116				
	City/ State and Zip Code				
E-mail add	EXECNAPLES@AOL.COM ess: (to be used for future annual report notification)				
For further information concerning	this matter, please call:				
ZULIMA DEL CARMEN Name of Contact Person	CHAVEZ at (239) 353-4017 Area Code & Daytime Telephone Number				
	ng amount made payable to the Florida Department of State:				
✓ \$35 Filing Fee \$43.75 Filing Certificate					
Mailing Address Amendment Section	Street Address Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment Articles of Incorporation of

EL MORRO CUBAN CUISINE CORP

•	Articles of Amendme	ent	_
	to Articles of Incorporat	ion	2 A
•	of Of		
FL MORRO C	UBAN CUISINE C	ORP	TASECRETARY AM O. 43
(Name of Corporation as cur		ida Dept. of State)	- AHARARY MY
Po	8000004170		SSEE OF S. 45
	(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:			- A.
A. If amending name, enter the new name	of the corporation:		
			The new
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE) C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	e: ICE BOX		
 If amending the registered agent and/or new registered agent and/or the new reg 		in Florida, enter the na	ame of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
		, Florid	la
	(City)	(Zip Code)	
New Registered Agent's Signature, if chang Thereby accept the appointment as registered	ing Registered Agent:		6.1

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	JORGE CHAVEZ	5555 GOLDEN GATE PKWY #121 NAPLES. FL 34116	_ ☑ Add _ ☐ Remove
			_
			_
provisio	nendment provides for an exchange ons for implementing the amendmen ot applicable, indicate N/A)	, reclassification, or cancellation of i nt if not contained in the amendment	ssued shares, itself:

The date of each amendmen	t(s) adoption: <u>00/04/2011</u>
Effective date <u>if applicable</u> :	08/04/2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	ZULIMA DEL CARMEN CHAVEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)