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Division of Corporations

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Account Number : I20060000156 Phone

: (305)818-0404

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Frat 1	Address.		

COR AMND/RESTATE/CORRECT OR O/D RESIGN CAFETERIA LA FE, INC.

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COVER LETTER

TO:	Amendment Section				
	Division	of Corporatio	ns		

NAME OF CORPOR	RATION: CAFETERI	A LA FE, INC.		
DOCUMENT NUMB	BER: P0800000916	52		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	RALPH PADRON	1		
•		Name of Contact Persor)	
	PADRON & ASS	OCIATES, INC.		
		Firm/ Company		
	2095 W 76TH ST	REET		
		Address		
	HIALEAH, FL 330	016		
		City/ State and Zip Code		
RA	LPH@RALPHPAI	DRON COM		
		sed for future annual report	notification)	
	`	····	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
For further information	n concerning this matter, plea	se call:		
RALPH PAD	RON	at (305	, 818-0404	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	utment of State:	
■ \$35 Filing 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)	
	ling Address	Street	<u>Address</u>	
	endment Section		ment Section	
Division of Corporations		Division of Corporations		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

, ,,	of		
CAFETERIA LA FE, INC			
	s currently filed with the Florida Dep	t. of State)	
P08000009162			
(Docume	nt Number of Corporation (if known)		•
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the followin	g amendment(s) t
A. If amending name, enter the new o	same of the corporation:		
MANGINI'S TRATTORIA	A, INC.		The new
name must be distinguishable and come "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations associated the contract of the cont	nation "Corp," "Inc," or "Co". A pi		
B. Enter new principal office address (Principal office address MUST BE A.)			-
C. Enter new mailing address, if app (Mailing address MAY BE A POST			- -
D. If amending the registered agent a new registered agent and/or the new registered agent and registered agent agent and registered agent a	ew registered office address:	rida, enter the name of the	-
Name of New Registered Agen			
	(Florida street address)		
New Registered Office Address	(City)	, Florida(Zip Code)	
	, •,	· - ,	· 2000 75

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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	Title	<u>Name</u>	<u>Address</u>
(Check One)			
1) Change	PD	DIAZ, RAYMUNDO	
Add × Remove			
Kemove			
2) Change	VPD	MILLARES, NIEVES	
Add × Remove			
3) Change	STO	DIAZ, MAILEN	
Add			
X Remove			
4) Change	PSTD	FERNANDEZ, MAYKEL	2390 W 76TH STREET
XAdd			HIALEAH, FL 33018
Remove		·	
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

atta	ich addition	al sheets, if	necessary).	(Be specifi	If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
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lf ar	n amendme ovisions for (if not appl	nt provides implement licable, indi	for an exching the ame	iange, reclas ndment if no	sification, or it contained	cancellation in the amendi	of issued share nent itself:	es.	
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The date of each amendment(s) a	deption: 02/23/2012
Effective date if applicable: 03	3/01/2012
enective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the sharehoders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) waswere sufficient for approval
by	(voting group)
	(voting group)
action was not required.	lopted by the board of directors without shareholderaction and shareholder
action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated 02/23/	/2012
Signature	Meliena
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)
	NIEVES MILLARES
	(Typed or printed name of person signing)
	VICE-PRESIDENT
	(Title of person signing)