## 1080003043

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EL RODEO	RESTAURANT, INC	
DOCUMENT NUMBER: PO8000230	43	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
WENDY TORRES Name of	of Contact Person	
EL RODEO PESTAURA	m/ Company	·
10465 SE HWY 4	41 Address	
BELLEVIEW, FL 30 City/St  WENDY_175@ VAHOR  E-mail address: (to be fised for the second secon	•	
E-mail address: (to be fised for the first seed for		
Wendy Torkes  Name of Contact Person		80 phone Number
Enclosed is a check for the following amount made	payable to the Florida Departs	ment 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)
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 Articles of Incorporation** of

		•
ι	Articles of Amendment	AND THE PROPERTY OF THE PARTY O
	to	t. of State)
•	Articles of Incorporation	AUC
	of	\$1,50mm 3
EL RODEO RESTAURAN	T. Tuc.	All Say AM
(Name of Corporation as co	urrently filed with the Florida Dep	t. of State)
P0000000000000000000000000000000000000		The state of the s
P0800023043	Number of Corporation (if known)	
(Document)	value of Corporation (if known)	
ursuant to the provisions of section 607. mendment(s) to its Articles of Incorporation		Profit Corporation adopts the following
. If amending name, enter the new nam	e of the corporation:	
ame must be distinguishable and conta		The new
. Enter new principal office address, if a Principal office address <u>MUST BE A STR</u>		<del></del>
. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u>		·
. If amending the registered agent and/onew registered agent and/or the new registered agent a		ida, enter the name of the
Name of New Registered Agent:	WENDY Toenes	
	10465 SE HWY 44	
New Registered Office Address:	(Florida street addres	s)
	Bellevien	Elouida
	(City)	, Florida (Zip Code) 34420
		(Lip county & 1 . Lie
ew Registered Agent's Signature, if char		
hereby accept the appointment as registere	ed agent. I am familiar with and acc	cept the obligations of the position.
	70 July	
-	Signature of New Registered Ager	nt, 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>	Name	Address	Type of Action
P	WILFREDY AMAYA	5174 NW 26th St. OCALA, FL 344BZ	_
<u>_</u> P	Maria Robeiguez	10465 5E 17WY 441 Belleview, FL 34420	_ Add _ □ Remove
	<del></del>		Add Remove
	ding or adding additional Articles, entered distributional sheets, if necessary). (Be spe		
provisi	mendment provides for an exchange, roons for implementing the amendment in applicable, indicate N/A)		

The date of each amendment	(s) adoption: 8 - 2 - 2010
	(date of adoption is required)
Effective date if applicable:	8-2-2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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	>1
oy	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 8	3-2-2010  M-na Resident or other officer – if directors or officers have not been
Signatura	m. Klus =
Signature (Bv	a director, president or other officer – if directors or officers have not been
sele	cted, by an incorporator – if in the hands of a receiver, trustee, or other court
	pinted fiduciary by that fiduciary)
	Maria Razaisma
	Maria Robriducz (Typed or printed name of person signing)
	President
	(Title of person signing)