Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : ASSOCIATED TAX CONSULTANTS GROUP, INC.

Account Number : I20110000056 : (305)823-9292 Phone Fax Number : (305)824~0703

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: A

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COR AMND/RESTATE/CORRECT OR O/D RESIGN EL GUAJIRO GROCERY & MEAT MARKET CORP

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Electronic Filing Menu

Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

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Articles of Amendment Articles of Incorporation of

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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 Joges	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	CASTILLO-PENA, YNERSA	2330 NE 12TH AVE
Add			POMPANO BEACH
Remove			FL. 33064
2) Change	т	PENA, VICTOR	2330 NE 12TH AVE
Add		•	POMPANO BEACH
Remove		•	FL. 33064
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		,	
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If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exch	nauge, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption: 08/01/2014	if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	···
Adoption of Amendment(s) (CMECK QNE)	
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)	
(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.	
Dated 08/67/2014	
Signature W	
(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 fiductary by that fiduciary)	
MIGUEL FERNANDEZ	<u></u>
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

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