## P08000045038

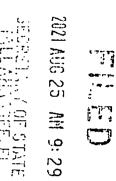
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A. Butter 917121

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF COL	RPORATION: LA CHAPINITA	INC				
DOCUMENT N	P08000045038					
The enclosed Ara	<i>ticles of Amendment</i> and fee are s	ubmitted for tiling.				
Please return all	correspondence concerning this m	atter to the following:				
		BRENDY I BARRIOS				
		Name of Contact Person	<del></del>			
	МА	TER OFFICE CORPORATION  Firm/ Company				
	200 N DENNING DRIVE SUITE 5					
		Address	···			
	CASSELBERRY, FL 32789					
	City/ State and Zip Code					
	KAMPOSMARVIN@LIV	/E.COM				
	E-mail address: (to be t	ised for future annual report	notification)			
For further infor	nation concerning this matter, plea	ase call:				
ALEJANDRO C	ALVEZ	at (	_)			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	ortment of State:			
S35 Filing F	ee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
t	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

LA CHAPINITA INC

EH FN

(Name of Corporation as co	urrently filed with the Florida Dept. of State)
P08000045038	2021 AUG 25 AH 9: 29
	imber of Corporation (if known)  SERTI OF STATE es, this Florida Profit Corporation adopts the following afficultment(s
its Articles of Incorporation:	es, this Florida Froja Corporation adopts the following and industries
A. If amending name, enter the new name of the corporat	tion:
N/A	The new
	ion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N A
(Maning undress MAT BE A FOST OF FICE BOA)	
D. If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a	
N/A	100.035.
Name of New Registered Agent	
(Fle	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fa	
Signature of	New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is are being tiled pursuant to s. 607.0120 (11) (e), 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)

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 = Ci Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office he 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 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	$\underline{PT}$	John Dog		
X Remove	$\underline{V}$	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	S	BRENDY I BARRIOS	1308 DIXON BLVD	
Add			COCOA, FL 32922	
Remove				
2) Change	P	NANCY M CAMPOS	1308 DIXON BLVD	
X Add			COCOA, FI. 32922	
Remove 3 ) Change	VP	NANCY BARRIOS	1308 DIXON BLVD	
Add			COCOA, FL 32922	
X Remove				
4) Change	_			
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A
· · · · · · · · · · · · · · · · · · ·

.

	option:	, if other than
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this dopartment of State's records.	ate will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was were adopaction was not required.	oted by the incorporators, or board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was were adop by the shareholders was were suf	oted by the shareholders. The number of votes east for the amendment ficient for approval.	(s)
• •	oved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
08/18/201 Dated	21	
Signature	Brendy I Barrios	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	
	BRENDY I BARRIOS	
-	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
-	(Title of person signing)	