

PD8000054695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

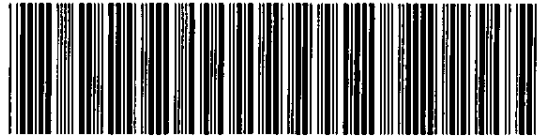
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amud 2/19/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: La Maguina Del Sabor Inc.

DOCUMENT NUMBER: P08000054695

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Antonio Irizarry - Alvarado
(Name of Contact Person)

La Maguina Del Sabor Inc
(Firm/ Company)

4358 Spring Blossom Drive
(Address)

Kissimmee, FL 34746
(City/ State and Zip Code)

For further information concerning this matter, please call:

Antonio Irizarry - Alvarado at (321) 402-2188
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2009

ANTONIO IRIZARRY-ALVARADO
4358 SPRING BLOSSOM DRIVE
KISSIMMEE, FL 34746

SUBJECT: LA MAQUINA DEL SABOR INC.
Ref. Number: P08000054695

We have received your document for LA MAQUINA DEL SABOR INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 909A00000668

527 563 04135
671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2009

ANTONIO IRIZARRY-ALVARADO
4358 SPRING BLOSSOM DRIVE
KISSIMMEE, FL 34746

SUBJECT: LA MAQUINA DEL SABOR INC.
Ref. Number: P08000054695

We have received your document for LA MAQUINA DEL SABOR INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

The date of adoption of each amendment must be included in the document.

The printing in the new officers/directors names must be very CLEAR.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 909A00000668

Articles of Amendment
to
Articles of Incorporation
of

La Maquina del Sabor, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000054695

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Antonio Irizarry-Alvarado

New Registered Office Address:

4358 Spring Blossom Drive

(Florida street address)

Kissimmee

(City)

Florida 34746

(Zip Code)

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.

Antonio Irizarry-Alvarado

Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Lillian Irizarry-Lledo</u>	<u>4358 Spring Blossom Drive</u> <u>Kissimmee, FL 34746</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Tre</u>	<u>Gladys Lledo-Gonzalez</u>	<u>4358 Spring Blossom Drive</u> <u>Kissimmee, FL 34746</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Sec</u>	<u>Michael Irizarry</u>	<u>4358 Spring Blossom Drive</u> <u>Kissimmee, FL 34746</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: 12-22-08

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ 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)

☐ 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 12-22-08

Signature Antonio Irizarry
(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 fiduciary by that fiduciary)

Antonio Irizarry Alvarado
(Typed or printed name of person signing)

President
(Title of person signing)