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(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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SEP 13 2016

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION:	ARNICERIA HUETA	MO, INC		
DOCUMENT NUMBER	P09000007727				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ndence concerning this ma	tter to the following:			
		NOE MAYA			
		Name of Contact P	erson		
CARNICERIA HUETAMO, INC.					
Firm/ Company					
2178 W. ATLANTIC AVE.					
Address					
	I	DELRAY BEACH, F	L 33445		
City/ State and Zip Code					
	E-mail address: (to be u	sed for future annual re	port notific	ation)	
For further information of	oncerning this matter, pleas	se call:			
N	OE MAYA	at (56)	279-2225	
Name of 0	Contact Person	Are	a Code & D	Paytime Telephone Number	
Enclosed is a check for the	ne 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 enclosed)	Ce is Ce (A	22.50 Filing Fee entificate of Status entified Copy additional Copy 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 16 AUG 31 AM 11:08

A HURTAMO STERLIARY IN TARK

	CARNICERIA HUETAMO, INC. With A St. Control of the
(Name of Corpo	oration as currently filed with the Florida Dept. of State)
	P0900007727
(Do	ocument Number of Corporation (if known)
tursuant to the provisions of section 607.1006, Floris Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following amendments
. If amending name, enter the new name of th	he corporation:
	The new
	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the
3. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>
If amending the registered agent and/or reg new registered agent and/or the new register	gistered office address in Florida, enter the name of the
	ered office address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address	Florida
New Registered Office Madress.	(City) (Zip Code)
Name of New Registered Agent New Registered Office Address:	, Florida, City) (Zip Code)
New Registered Agent's Signature, if changing hereby accept the appointment as registered age	z Registered Agent: ent. I am familiar with and accept the obligations of the position.
vo, secop ine appointment de registered age	. any animal with and decept the congunities by 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.

X Change	<u>PT</u>	John De	<u>oe</u>			
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Si	mith_			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s		
1) Change	VP	<u></u>	MIGUEL ARZATE	2405NW 25TH AVE		
X Add				BOYNTON BEACH, FL 33436		
Remove						
2) Change		_				
Add						
Remove						
3) Change			·			
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

. If amending or adding additional Articles, enter change(s) here:						
(Attach additional she	ets, if necessary).	(Be specific)				
					.	
	 					
					· · · · · · · · · · · · · · · · · · ·	
				<u></u>		
-						
					·····	
If an amendment pr	ovides for an excha	inge, reclassifica	tion, or cancella	tion of issued sha	ares.	
provisions for impl	ementing the amen	dment if not cor	tained in the am	endment itself:		
(if not applicable	e, indicate N/A)					
	,					

	08/01/2916
The date of each amendment(s) ad	option:, if other than the
date this document was signed.	20/20/2007
Effective date <u>if applicable</u> :	08/01/2015
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	8/29/16
Signature MA	le mayo
(By a d selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	NOE MAYA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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