

P090000026024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

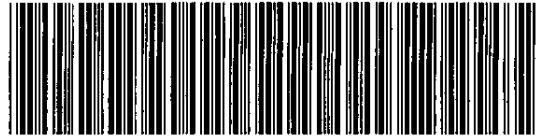
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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900159879529

08/31/09--01033--010 \*\*43.75

*Amend*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 OCT 23 AM 8:57

T Roberts OCT 26 2009



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 2, 2009

MANUEL DE LA MAZA  
T & M FOOD & BEVERAGE, INC.  
P O BOX 430168  
MIAMI, FL 33243-0168

SUBJECT: T & M FOOD & BEVERAGE, INC.  
Ref. Number: P09000026024

We have received your document for T & M FOOD & BEVERAGE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 909A00029444

RECEIVED  
09 OCT 23 AM 10:37  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

WILLIAM A. CHIARA, JR.  
Attorney and Counselor at Law  
4701 West 4<sup>th</sup> Avenue, Hialeah, Florida 33012  
Phone (305)557-2577 Fax: (305)825-3876 [chiaralegal@aol.com](mailto:chiaralegal@aol.com)

October 20, 2009

Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 33214

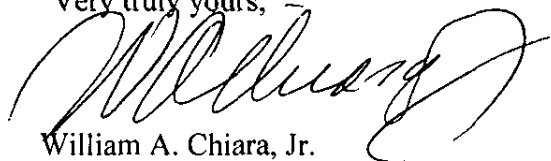
Re: T & M Food & Beverage, Inc.

To whom it may concern:

Enclosed please find Articles of Amendment to Articles of Incorporation on the above mentioned corporation including the missing information.

Please change your records accordingly.

Very truly yours,



William A. Chiara, Jr.

WAG  
Enclosures  
2009 OCT 23 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*the check was already sent.*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: T & M FOOD & BEVERAGE, INC.

DOCUMENT NUMBER: P09000026024

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

Please return all correspondence concerning this matter to the following:

MANUEL DE LA MAZA

Name of Contact Person

T & M FOOD & BEVERAGE, INC.

Firm/ Company

P.O. BOX 430168

Address

Miami, FL 33243-0168

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANUEL DE LA MAZA

Name of Contact Person

at ( 305 )

987-6202

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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

T & M FOOD & BEVERAGE, INC.

09 OCT 23 AM 8:57

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

P09000026024

(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:**

N/A

*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**)

P.O. BOX 430168

Miami, FL 33243-0168

**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:

New Registered Office Address:

(Florida street address)

(City)

, Florida  
(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.*

\_\_\_\_\_  
*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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>STD</u>	<u>ANTONIO MOREJON</u>	<u>7850 S.W. 86th St., Unit 13</u> <u>Miami, FL 33143</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PSTD</u>	<u>MANUEL DE LA MAZA</u>	<u>7850 S.W. 86th St., Unit 13</u> <u>Miami, FL 33143</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input 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)*

DELETING: ANTONIO MOREJON

**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)*

RECLASSIFY SHARES AS FOLLOWS: MANUEL DE LA MAZA 500 SHARES.

The date of each amendment(s) adoption: August 24, 2009

Effective date if applicable: August 24, 2009 (date of adoption is required)  
(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 August 24, 2009

Signature \_\_\_\_\_

(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)

MANUEL DE LA MAZA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)