P09000058359

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09/24/09--01042--002 **35.00



Amend News 9-25-09

COVER LETTER

TO: Amendment Section

Division of Corporations	** **			
NAME OF CORPORATION: El Gigan	le Mini Market Inc.			
DOCUMENT NUMBER: P09000)58359			
The enclosed Articles of Amendment and fee are su	abmitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Rosa M. S.	of Contact Person			
EL Coigante	Mini Market Inc.			
4303 Gunn	Address			
Tampa, PL 33618 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, plea	ase call:			
Name of Contact Person	at (339) 357-289/ 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 & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

•	of Og Sea
EL Gigante W	of Og SEP 24 AM 10. Irrently filed with the Florida Dept. of State)
(Name of Corporation as cu	prently filed with the Florida Dept. of State
P09000058	urrently filed with the Florida Dept. of State) 359 Sumber of Corporation (if known)
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following n:
A. If amending name, enter the new name	e of the corporation:
	The new
abbreviation "Corp.," "Inc.," or Co.," or	in the word "corporation," "company," or "incorporated" or the the designation "Corp," "Inc," or "Co". A professional corporation professional association," or the abbreviation "P.A."
B. Enter new principal office address, if a (Principal office address MUST BE A STR	
	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	
D. If amending the registered agent and/o	or registered office address in Florida, enter the name of the
new registered agent and/or the new r	egistered office address:
Name of New Registered Agent:	Rosa M. Silva
New Registered Office Address:	4303 Gunn Hwy (Florida street address)
	TAMAO , Florida 336/8 (City) (Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	nging Registered Agent: ed agent. I am familiar with and accept the obligations of the position.
-	Signature of New Registered Agent, if changing

removed an	the Officers and/or Directors, enter the d title, name, and address of each Office tional sheets; if necessary)		irector being
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>P</u>	Juan C. Echevarnia	4303 Gunn Huy Thrupa PC 33618	_
<u>P</u>	Bosa H. Silva	4303 Gunn Hwy TAMPR, FL 33615	Add C Remove
VP	Robert Sanchez Tr	4303 Gunn Hwy TAMPA, FL 336/8	∠ ☑ Add □ Remove
	Iditional sheets, if necessary). (Be specifically be shown that the sheets). (Be specifically sheets). (Be specifically sheets).	From UP. To	3 60nn Huy Mna FC33618 BO33 Gunn Hu Tampa FC33619
provisio	nendment provides for an exchange, reclons for implementing the amendment if not applicable, indicate N/A)		
	C. Echevarria ha a M. Silva is		

The date of each amendment(s) adoption: 9116 69
Effective date if applicable:	(date of adoption is required)
· ·	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by Juan C.Ech	evarria & Rosa H. Silva." (voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	9/16/09
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	Vice President (Title of person signing)