# P09000058359

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(Document Number)  Certified Copies : Certificates of Status				
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2009 OCT 16 AH 10: 19
SECRETARY OF STATE

#### **COVER LETTER**

TO: Amendment Section
' Division of Corporations

NAME OF COR	PORATION:	RATION: EL GIGANTE MINI MARKET INC			
DOCUMENT NU	JMBER:	P09000058359			
The enclosed Artic	cles of Amendment and	fee are submitted for filing.			
Please return all co	orrespondence concerni	ng this matter to the following:			
	ROSA M SILVA  Name of Contact Person				
		Name of Confact Person			
	EL GIGANTE	MINI MARKET INC C/O ROSA SILVA			
		Firm/ Company			
	27221 STATE ROAD 56,PMB 138				
		Address			
	v	/ESLEY CHAPEL, FL 33544			
		City/ State and Zip Code			
_	E-mail address: (to	ilvarm4@yahoo.com be used for future annual report notification)			
For further inform	ation concerning this n	atter, please call:			
F	ROSA M SILVA	at ( 239 ) 357-2891			
. Name	e of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amo	ount made payable to the Florida Department of State:			
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status				
Mailing Address  Amendment Section		Street Address Amendment Section			
	f 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**

## FILED 2009 OCT 16 AM 10: 19 SECRETARY OF STATE TALLAHASSEE. FLORIDA of EL GIGANTE MINI MARKET INC (Name of Corporation as currently filed with the Florida Dept. of State) P09000058359 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607 1006. Florida Statutes, this Florida Profit Corneration adopts the following

	N/A		The ne
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to ame must contain the word "chartered," "p	the designation "C	orp," "Inc," or "	Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		N/A	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)		N/A	
D. If amending the registered agent and/o new registered agent and/or the new re			da, enter the name of the
	NI/A		
Name of New Registered Agent:	N/A		
Name of New Registered Agent:  New Registered Office Address:	N/A	ida street address)	
	N/A		, Florida

Page 1 of 3

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## 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) Title **Type of Action** <u>Address</u> Name Director Juan Carlos Echevarria ☐ Add 4303 Gunn Hwy ☑ Remove Tampa, FL 33618 \_\_\_\_\_ □ Add ☐ Remove ☐ Add ☐ 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: 9/17/09				
_	9/17/09	(date of adoption is required)		
3 4 9	(no more than	90 days after amendment file date)		
Adoption of Amendment(s)	C	HECK ONE)		
The amendment(s) was/we by the shareholders was/w		the shareholders. The number of votes cast for the amendment(s) rapproval.		
		the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):		
"The number of votes	cast for the ame	endment(s) was/were sufficient for approval		
by	(voting group)	, y,		
	(voting group)			
The amendment(s) was/we action was not required.	ere adopted by th	ne board of directors without shareholder action and shareholder		
The amendment(s) was/we action was not required.	ere adopted by th	ne incorporators without shareholder action and shareholder		
Dated	alin	<u>\09</u>		
Signature		ident on other officers if discreters on officers have not been		
sel	ected, by an inco	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court by that fiduciary)		
		ROSA M SILVA		
	(T	yped or printed name of person signing)		
•		PRESIDENT/OWNER		
	(Title	of person signing)		