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SECRETARY OF STATE

TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section * Division of Corporations

NAME OF CORP	ORATION:	PANADERIA ELQUETZAL INC	
DOCUMENT NU	MBER:	P09000069866	
The enclosed Article	les of Amendment and t	ee are submitted for filing.	
Please return all con	respondence concernin	g this matter to the following:	
-	G	LORIA LOPEZ RAMIREZ	
		Name of Contact Person	
-	PAN	ADERIA EL QUETZAL INC	
		Firm/ Company	
1367 8TH STREET			
		Address	
-	WEST	PALM BEACH FLORIDA 33401	
		City/ State and Zip Code	
	ELQUET E-mail address: (to b	ZAL54@HOTMAIL.COM e used for future annual report notification)	
For further informa	tion concerning this ma	tter, please call:	
GLORIA	A LOPEZ RAMIREZ	at (561) 762-0081	
Name o	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amou	nt made payable to the Florida Department of State:	
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**

PANADERIA EL QUE IZAL INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P0900069866	¹ y _{(0.}
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> amendment(s) to its Articles of Incorporation:	noration adopts the following
A. If amending name, enter the new name of the corporation:	
PANADERIA Y CAFETERIA EL QUETZAL INC	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." 1106 LUCERNE AVENUE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) **SUITE 3 4 5** LAKE WORTH FL 33460 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) **1367 8TH STREET** LAKE WORTH, FLORIDA 33460 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) , Florida_ (City) (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> Address Type of Action _ D 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) N/A

The date of each amendment(s) adoption: 11/09/2010	
Effective date if applicable: 11/09/2010 (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 by the shareholders was/were sufficient for approval.	cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately or	
"The number of votes cast for the amendment(s) was/were sufficient for app	proval
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without sharehol action was not required.	der action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder a action was not required.	ction and shareholder
Dated_11/09/2010	
Signature × Colonia Lopes	
(By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	
GLORIA LOPEZ RAMIREZ	
(Typed or printed name of person signing	g)
PRESIDENT (Title of person signing)	
(Title of person signing)	