P10000022738

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COVER LETTER

TO: Amendment Section Division of Corporations West Flagler Grocery Corp. NAME OF CORPORATION: 10000022738 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Arturo Alonso Pullu West Flagler Grocery 1822 NW 685T miami FL 33147 Alturo alonso 144 C Gmail Cou E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43,75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

	2024 OCT 11 PM 1 CO
(Name of Corporation as currently	<i>A</i>
West Flagler Gr	OCCCY THOSPINIS
(Document Number of)	Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "ce	Wing COCP. The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name musi comum me word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1822 NW 68 ST. MIANI, FL 33147
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1822 NW 68 ST. MIAMI, FC. 33147.
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	J/H
New Registered Office Address:	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar w	: tith and accept the obligations of the position.
\sim	/A
Signature of New Re	egistered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s, 607,0120 (11) (e), F.S.

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.

WINE JONES, V US ICEMOV	., triti :.40		••••	
Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	x / / A	<u>Addres</u> s
1) Change			10/11	
Add			,	
Remove			11/12	
2) Change	-			
Add			: 1 [n	
Remove 3) Remove			N/H	
Add			1	
Remove			NA	
4) Change				
Add			1 0	
Remove			NIA	
5) Change				
, Add			1	
Remove				
6) Change				
Add				
Remove				

	s, if necessary). (Be specific)
	
an amendment	vides for an exchange, reclassification, or cancellation of issued shares,
rovisions for im	menting the amendment if not contained in the amendment itself: a, indicate N/A)
(9 // 144///	,
	/ /
	N 1 ///

The date of each amendment(s) adoption: _	OCT. 2,2024	, if other than the
date this document was signed.	OCT. 2,2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date of State's records.	will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by the action was not required.	ne incorporators, or board of directors without shareholder action :	and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.	
must be separately provided for each voti	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	FILED 2024 OCT 11 PM 4: 28
hy	ing group entitled to vote separately on the amendment(s): mendment(s) was/were sufficient for approval voting group)	OT I PRI
Dated		28
selected, by an in	resident or other officer – if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)	
	Arturo Alonso Pullu (Typed or, printed name of person signing)	
	(Typed of printed name of person signing)	
	(Title of persyllaigning)	