P1000039332

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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DIVISION OF CORPORALIONS
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Cubilete R	estaurant Corp		
DOCUMENT NUMB	ER: P1000003933	32		
	f Amendment and fee are su			
Please return all corresp	ondence concerning this ma	atter to the following:		
		Jose Vera		
_		Name of Contact Person	n	
	Cul	bilete Restauran	t Corp	
_		Firm/ Company	·	
	954 P	ine Island Road	, Suite D	
_		Address		
	Cape	Coral, FL 339	09	
_		City/ State and Zip Cod	e	
	prontoeyn	ress@embarqm	ail com	
	•	sed for future annual report		
	concerning this matter, please			
Jose Vera		_{at (} 239	240-0862	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	
	ng Address		Address	
	dment Section on of Corporations	Amendment Section		
	on of Corporations Box 6327	Division of Corporations Clifton Building		
	assee, FL 32314		executive Center Circle	
	·		assee, FL 32301	

Articles of Amendment

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Articles of Incorporation

of

Ex	plosion Latina Res	taurant	(C.	
(Name of Corporation as	s currently filed with the Flor	da Dept. of State)		-
	P10000039332			
(Documen	nt Number of Corporation (if kn	own)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Flo</i>	rida Profit Corpor	ation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
Cubilete Restaurant Cor	p			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	". A professional		
B. Enter new principal office address, (Principal office address MUST BE A S				_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				DIVISION OF CORPORATION OF CORPORATI
D. If amending the registered agent an new registered agent and/or the new		in Florida, enter	the name of the	* *
Name of New Registered Agent			<u></u>	
	954 Pine Island R			
	(Florida street	iddress)	33000	
New Registered Office Address:	Cape Coral	,	Florida 33909 (Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	(City) hanging Registered Agent: tered agent. I am familiar with	and accept the ob		
0	1/			
Si	gnature of New Registered Age	nt, 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)

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.

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>	Name	<u>Addres</u> s
1) Change Add	P	Madelyn Marquez	954 Pine Island Rd Cape Coral, FL 33909
2) Change Add Remove	P	Jose Vera	954 Pine Island Rd Cape Coral, FL 33909
3) Change Add Remove			
4) Change Add Remove		_	
5) Change Add Remove			
6) Change Add Remove		-	

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			_
an amendment provides for an excl	ange, reclassification, or	cancellation of issued sh	ares.
n amendment provides for an excl ovisions for implementing the ame	ndment if not contained i	n the amendment itself:	
(if not applicable, indicate N/A)	- 1111		
			<u></u>
	•		

The date of each amendmen	t(s) adoption: 04/30/2012
Effective date <u>if applicable</u> :	04/20/202
enective date in appreciable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	re approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated 04 /	30/2012
Signature _	Dep. V-
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
	Jose Vera
	(Typed or printed name of person signing)
	President
	(Title of person signing)