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## COR AMND/RESTATE/CORRECT OR O/D RESIGN LA GUADALUPANA TORTILLERIA INC.

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Fax: (954) 633-7850 Fax: +1 (850, 617-6380 Page 2 of 6 08/24/2015 3.26 PM **COVER LETTER TO:** Amendment Section Division of Corporations NAME OF CORPORATION: LA GUADALUPANA TORTILLERIA INC DOCUMENT NUMBER: P10000087358 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RUFINA AGUIRRE Name of Contact Person LA GUADALUPANA TORTILLERIA INC Firm/ Company **320 SW 62 AVENUE** Address MARGATE, FL 33068 City/ State and Zip Code TAXRIGHT7@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RUFINA AGUIRRE Name of Contact Person 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 & S35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

From: Amelia Basso

Fax: (954) 633-7850

Fax: +1 (850) 817-6380

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SEC TABLE TO LEAD OF GURATIONS

Articles of Amendment to Articles of Incorporation of

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LA GUADALUPANA TORTILLERIA INC.	· •
(Name of Corporation as currently fi	led with the Florida Dept of State)
P10000087358	•
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	prida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.,	company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	, Florida
(C	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Signature of New Reg	sistered 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)

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.

Example: X Change	<u>PT</u>	John Doe	, 1 ]
X Remove	<u>Y</u> .	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	RUFINA.AGUIRRE	320 SW 62 AVENUE
Add			MARGATE, FL 33068
X Remove			
2) Change	P	S'ANDRA GARCIA	: 320 SW 62 AVENUE
X Add	410 · · · · · · · · · · · · · · · · · · ·		MARGATE, FL 33068
Remove			:
3 ) Change	VP	NATALIA S GARCIA	320 SW 62 AVENUE
X Add			MARGATE, FL 33068
Remove			
4) Change	s	KARLA N GARCIA	10934 ROYAL PALM BLVD
X Add			CORAL SPRINGS.FL 33065
Remove			
5) Change	D	CARLOS A GARCIA	320 SW 62 AVENUE
X Add			MARGATE, FL 33068
Remove			:
6) Change			
Add			
Remove			

To:

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(Attach additional sheets, if necessary). (Be specific)	
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)	:S.
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CALLER OF GORPOBATHINS The date of each amendment(s) adoption: 8-13-2015 if other than the date this document was signed. Effective date if applicable: 8-13-2015

(no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval ■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) **RUFINA AGUIRRE** (Typed or printed name of person signing)

PRESIDENT

(Title of person signing)