## P1000090305

(Re	equestor's Name)		
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	e #)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: MARTINEZ FOO	D SERVICE, INC.		
DOCUMENT NUMBE	R:			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
JC	ORGE A. MARTINEZ			
	Name of Contact Person			
M	MARTINEZ FOOD SERVICE, INC.			
_	Firm/ Company			
21	2102 WEST PENSACOLA STREET			
	Address			
T.	TALLAHASSEE, FL 32304			
		City/ State and Zip Cod	e	
loscome	oadrestallahassee@gmail.co	nn		
		sed for future annual report	notification)	
•	2		,	
For further information c	oncerning this matter, pleas	se call:		
JORGE A. MARTINEZ		at (	766-8456	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for th	ne following amount made	payable to the Florida Depa	iriment 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)	
Amend Divisio P.O. Be	g Address ment Section on of Corporations ox 6327 assee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

(14ame of Corporation as current	tly filed with the Florida Dept. of Stat	<u>e</u> )	
P0000090305			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the	following amen	:dment(s)
A. If amending name, enter the new name of the corporation:			
N/A		The	new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nan	or the abbrevia	ation
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A		<del></del>
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		ri ⊇
		700	크 
	**************************************		
		<u> </u>	
). If amending the registered agent and/or registered office add			<del>!!</del> 
	<u>91</u>	0.0034 -4	
new registered agent and/or the new registered office address		) and the same	C.
new registered agent and/or the new registered office address		)	Ċ.
new registered agent and/or the new registered office address  N/A  Name of New Registered Agent	and address)	) 100 ft	u.
Name of New Registered Agent  Note: Note: New Registered Agent (Florida str	reet address)	)	ų.
new registered agent and/or the new registered office address  N/A  Name of New Registered Agent	reet address), Florida	(Zip Code)	

1.

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	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	v	ALEJANDRA MARTINEZ	2102 WEST PENSACOLA ST.
X Add			TALLAHASSEE, FL 32304
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			<del></del>
Add		·	7,000 901.7
Remove			
5) Change			
Add			****
Remove			
6) Change			·
Add			
Remove			

Attach additional sheets, if necessary).	). (Be specific)
A	
	The state of the s
	) 16 d
revisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	tempinent is not contained in the unionisms.
1	
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	10/01/2015	
The date of each amendment date this document was signed.		, if other than the
-	10/01/2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date to Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	ı
	e approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	ıt
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	10/15/15	
Signature	- The first	
	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	pointed fiduciary by that fiduciary)	
	JORGE A MARTINEZ	
	(Typed or printed name of person signing)	
	RESIDENT	
	(Title of person signing)	