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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORA	ATION:TIENDA I	DE GUATEMALA, INC.	
DOCUMENT NUMBI	ER:P1100000	07591	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
	ANGELINA BOWL	ES	
_		Name of Contact Person	n
	TIENDA DE GUATE	MALA, INC.	
_		Firm/ Company	
	304 WEST MAIN ST.		
_		Address	
	IMMOKALEE, FL 341	42	
_		City/ State and Zip Cod	e
	F-mail address: (to be us	ed for future annual report	notification)
	E-man address. (to be us	ed for future unitial report	nonneadony
For further information	concerning this matter, pleas	e call:	
ANGELINA BOWLES		239	243-5686
Name of Contact Person			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)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

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SECRETARY OF A SAME
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TIENDA DE GUATEMALA, INC.

	y filed with the Florida Dept. of State)	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7591		·
(Document Number of	Corporation (if known)	
6, Florida Statutes, this I	Florida Profit Corporation adopts the following	g amendment(s)
of the corporation:		
on "Corp," "Inc," or "C	Co". A professional corporation name must	
LI ADDRESS)		
le:		
FICE BOX)		
r registered office addr	page in Florida, antay the name of the	
NGELINA BOWLES	•	
		_
4 WEST MAIN ST.		•••
(Florida stre	eet address)	
IMOKALEE	. Florida 34142	•
	of the corporation: the word "corporation" the word "corporation" "or the abbreviation "in "pplicable: EET ADDRESS) de: FICE BOX) r registered office address: NGELINA BOWLES 4 WEST MAIN ST. (Florida street)	the word "corporation," "company," or "incorporated" or the an "Corp," "Inc," or "Co". A professional corporation name must, " or the abbreviation "P.A." pplicable: EET ADDRESS) de: FICE BOX r registered office address in Florida, enter the name of the egistered office address: NGELINA BOWLES 4 WEST MAIN ST. (Florida street address)

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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	PATRICK A BOWLES	17021 CAROLYN LN
Add X Remove			N. FT. MYERS, FL 33917
2) X Change	VP	PATRICK A BOWLES	17021 CAROLYN LN
Add	7.0.		N. FT. MYERS, FL 33917
Remove			
3) Change	<u>P</u>	ANGELINA BOWLES	17021 CAROLYN LN
X Add			N. FT. MYERS, FL 33917
Remove			A6 18
4) Change	VP	ANGELINA BOWLES	17021 CAROLYN LN
Add			N. FT. MYERS, FL 33917
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach <i>additional s</i>	ding additional Articles, enter change(s) here: heets, if necessary). (Be specific)
	<i>/</i> ·
	
	
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an amendment	provides for an exchange, reclassification, or cancellation of issued shares, plementing the amendment if not contained in the amendment itself:
if not application (if	plementing the amendment is not contained in the amendment itsett:
· · · · · · · · · · · · · · · · · · ·	

. 07/19/2016	
The date of each amendment(s) adoption:, if other the	nan the
date this document was signed.	
07/19/2016	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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	
by" (voting group)	
(voting group)	
☐ 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.	
7/19/2016 Dated	
Signature Angelina Bowles (By a director, president or other officer – if directors or officers have not been	
(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)	
ANGELINA BOWLES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	