## P/1000030999

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	: ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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05/25/12--01007--005 \*\*35.00

May



MAY 2.5,2012 T. ROBERTS

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: SABOR TUN	ERO CAFETERIA 8	RESTAURANT INC
	<sub>ER:</sub> P1100003099	9	
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
	ARNALDO PENA	١ .	
_		Name of Contact Person	R
<del></del>		Firm/ Company	
•	1390 NW 2ND S	TREET APT # 3	
-		Address	
1	MIAMI FL 33125		
_		City/ State and Zip Cod	e
For further information	E-mail address: (to be us concerning this matter, pleas		
ARNALDO PE	ENA	at (786	<u>444-1703</u>
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:
<b>\$</b> 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

## SABOR TUNERO CAFETERIA & RESTAURANT INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000030999

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent
(Florida street address)
·
New Registered Office Address: , Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent) I am familiar with and accept the obligations of the position.  Signature of New Registered 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	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	v	FRANCISCO CHAMIZO	1390 NW 2TH STREET
Add x Remove			APT # 3 MIAMI FL 33125
2) Change Add Remove	•		
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		_	

amending or adding additional A ttach additional sheets, if necessary,	). (Be specij	fic)	•		
			· · · · · · · · · · · · · · · · · · ·	<del>V </del>	
		<del></del>			
			***************************************		
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		*		·	
an amendment provides for an ex	change, recla	ssification, or	cancellation of i	issued shares.	
rovisions for implementing the an (if not applicable, indicate N/A)	<u>ienament 11 n</u>	ot cortained i	i the amendine	H HSCH;	
<u> </u>		······································			
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			-	<u>,</u>	
			-		·

The date of each amendment(s	adoption: 05/18/2012
Effective date <u>if applicable</u> :	5/18/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated_05/18	/2012
Signature (Bya	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	ARNALDO PENA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)