

P11000093144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

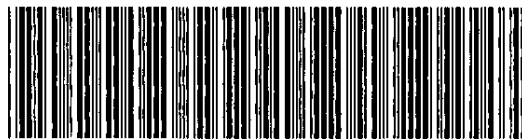
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/23/12--01013--001 **35.00

FILED
12 AUG 22 PM 12:15
CLERK OF COURT
TALLAHASSEE, FLORIDA

Amend

AUG 22 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EL TIPICO Restaurant Inc
DOCUMENT NUMBER: PL000093144

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ada Rodriguez
Name of Contact Person
EL Tipico Restaurant Inc
Firm/ Company
1560 forest lakes Cir # A
Address
West palm Beach, FL, 33406
City/ State and Zip Code
FLAKITA-821@Hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ada Rodriguez at (561) 713-5415
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2012

ADA A RODRIGUEZ
EL TIPIKO RESTAURANT INC
1560 FOREST LAKES CIR #A
WEST PALM BEACH, FL 33406

SUBJECT: EL TIPIKO RESTAURANT INC
Ref. Number: P11000093144

We have received your document for EL TIPIKO RESTAURANT INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted to remove and add officers.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 512A00019732

2012 AUG 20 AM 9:37

TO AGENCY OF FILING
SUFFICIENCY OF FILING

1
FILED
12 AUG 22 PM 12:15
SEAL OF THE STATE
TALLAHASSEE FLORIDA
106

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

(Document Number of Corporation (if known))

A. If amending name, enter the new name of the corporation:

B. Enter new principal office address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature, if changing Registered Agent as registered agent. I am _____

Signature of New Registered Agent, if changing

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 08/07/2012

Effective date if applicable: 08/07/2012
(no more than 90 days after amendment file date)

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)

☐ 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.

Dated 08/07/2012

Signature [Signature]

(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)

Ada A. Rodriguez
(Typed or printed name of person signing)

Vice President
(Title of person signing)