P11000095291

(Requestor's Name)				
(Add	dress)	···		
(Add	dress)			
(City	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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2022 MAR 31 AM 9: 2

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	ION: PASTA SHOPPE	CORP			
DOCUMENT NUMBER	D11000005701				
The enclosed Articles of A	mendment and fee are su	bmitted for filing.			
Please return all correspon-	dence concerning this ma	tter to the following:			
SEL	BASTIAN RODRIGUEZ				
		Name of Contact Person	1		
PAS	STA SHOPPE CORP				
		Firm/ Company			
731	7311 COLLINS AVE				
		Address			
MlA	MIAMI BEACH, FL 33141				
-		City/ State and Zip Code	2		
тгр	astausa@hotmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information cor	ncerning this matter, pleas	se call:			
SEBASTIAN RODRIGUEZ		786 at (642-1072		
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:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to

2022 | SEC

Articles of Incorporation of			MAR	77
PASTA SHOPPE CORP	01	ARY SSE	$\frac{\omega}{2}$	
(Name of Corporation a	as currently filed with the Florida Dept. of State	ا المار (PH	
P11000095291			بود	J
(Document	Number of Corporation (if known)		2	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the f	ollowing a	amend	ment(s) to
A. If amending name, enter the new name of the corpo	oration:	_		
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviate	"Co". A professional corporation name must	reviation)., "
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></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 new registered agent and/or the new registered office.				_
Name of New Registered Agent				
	(Florida street address)	···		
New Registered Office Address:	, Florida			_
	(City)	(Zip Co	de)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: n familiar with and accept the obligations of the po	sition.		
Signature	e of New Registered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP	_	JORGE STEKELORUM	2233 CALAIS DR
Add				#42
X Remove				MIAMI BEACH, FL 33141
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
N/A				
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)				
N/A				

The date of each amendment(s)) adoption:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendi	nent file date)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing. Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors w	rithout shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes c sufficient for approval.	ast for the amendment(s)
	approved by the shareholders through voting groups for each voting group entitled to vote separately on	
"The number of votes ca	ast for the amendment(s) was/were sufficient for app	roval
by		
	(voting group)	
Dated	03/24/22	
Signature	a director, president or other officer – if directors or	officers have not been
	eted, by an incorporator – if in the hands of a receive	
аррс	pinted fiduciary by that fiduciary)	
	SEBASTIAN RODRIGUEZ	
	(Typed or printed name of person sign	ning)
	PRESIDENT	

(Title of person signing)