## P120006973

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C. GOLDEN DEC 1 8 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations

.

NAME OF CORPORATION	ON:ONCONCITO CU	JBANO CRIOLLO RESTA	URANT & CAFETERIA IN
DOCUMENT NUMBER:			
The enclosed Articles of An		ibmitted for filing.	
Please return all correspond	ence concerning this ma	itter to the following:	
SILV	IA CELINA MORENC	)	
		Name of Contact Person	1
RING	ONCITO CUBANO C	RIOLLO RESTAURANT	& CAFETERIA INC
		Firm/ Company	<del></del>
890 S	.W. 87TH AVENUE		
		Address	
MIA	MI, FL 33174		
		City/ State and Zip Code	2
RAMOSSII	LVIA51@YAHQQ.CO	M	
	E-mail address; (to be u	sed for future annual report	notification)
For further information conc	erning this matter, plea-	se call:	
	-		271 2274
SILVIA CELINA MORENO		at ( <u>786</u>	_)
Name of Cor	itact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the f	following amount made	payable to the Florida Depa	riment of State:
S35 Filing Fee E	3\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$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		Amen <b>d</b> Divisio Clifton	Address ment Section in of Corporations Building yecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILEU

RINCONCITO CUBANO CRIOLLO RESTAURANT & CAFETERIA INC

2017 DEC 15 PH 4: 18

(Name of Corporation	as currently filed with the Florida Dept. of State)
P12000006973	11
(Docume	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDR</u>	(ESS)
	<del></del>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
<del></del>	(Florida street address)
New Registered Office Address:	, Florid2
	•
New Registered Agent's Signature, if changing Regist	tered Agent:
I hereby accept the appointment as registered agent. I t	um familiar with and accept the obligations of the position.
Sionnti	ure 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.

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>	Address
1) Change	VP	SILVIA CELINA RAMOS	950 NW 23 CT
Add			MIAMI, FL 33125
X Remove			
2) Change	VP	SILVIA CELINA MORENO	890 S.W. 87TH AVENUE
X Add			MIAMI, FL 33174
Remove			
3 ) Change		_	
Add			·
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remare			

Attach <i>additi</i>	or adding addition onal sheets, if neces	sary). (Be spe	rcific)			
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<u>ran amengn</u> provisions f	nent provides for a or implementing th	<u>n exchange, rec</u> le amendment i	<u>lassification, c</u> f not contained	or cancellation I in the amend	of issued share ment itself:	<u>'S,</u>
(if not a	pplicable, indicate N	V/A)			<del></del>	
						<del></del>
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					<del></del>	
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The date of each amendment(s) a date this document was signed.	deption:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the Do	plack does not meet the applicable statutory filing requirements, this expartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendmen ifficient for approval.	t(s)
	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dared 12 -	E. 2017.	
(By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other content to the fiduciary by that fiduciary)	
	SILVIA CELINA MORENO	
	(Typed or printed name of person signing)	
	VICE-PRESIDENT	
	(Title of person signing)	<del></del>