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COVER LETTER

TO: Amendment Section Division of Corporations

i i

NAME OF CORPOR	ATION:CHICAS DE	L CARIBE CORP.	<u></u>
DOCUMENT NUMB	£12000029052		
The enclosed Articles of	of Amendment and fee are sul	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Romary Rodriguez		
-		Name of Contact Person	n
	Rory's Accounting		
-		Firm/ Company	
	13130 SW 15th Ln		
-		Address	· · · · · · · · · · · · · · · · · · ·
	Miami, FL 33184		
-		City/ State and Zip Cod	ę
FORVSS	ccounting@yahoo.com		
	=	ed for future annual report	notification)
	,		
For further information	concerning this matter, pleas	e call:	
Romary Rodriguez		786	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable 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)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

CHICAS DEL CARIBE CORP.

	<u>Corporation as currently</u>	y filed with the Florida Dept	. of State)		
P12000029052					
	(Document Number of	Corporation (if known)	- ,-		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06. Florida Statutes, this	Florida Profit Corporation ad	lopts the following amendment(s) to		
A. If amending name, enter the new nam N/A	e of the corporation:		The new		
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	on "Corp," "Inc," or "	Co', A projessional corporo	rated" or the abbreviation		
B. Enter new principal office address, if:	amtionblas	N/A			
(Principal office address MUST BE A STR			24 G 8		
			E E T		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	Z1 /# D		
			07.07.00 07.07.00 07.07.00		
D. If amending the registered agent and/ new registered agent and/or the new r			ne of the		
Name of New Registered Agent _	Romary Rodriguez				
-	3130 SW 15th Ln				
_	(Florida str	vet address)			
	Miami		. Florida		
New Registered Office Address:			, riorida		

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 Doc 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 Doc, 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	\underline{V}	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	Jonny A. Pineyro Izquierdo	12818 SW 8th St.
Add			Miami, FL 33184
X Remove			
2) Change	Р	Merlin Izquierdo Perez	11201 SW 55th St.
X Ada			Unit 245
Remove			Miramar, FL 33025
3.) Change	V	Ricardo Castillo	11201 SW 55th St,
X Ada			Unit 245
Remove			Miramar, FL 33025
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Remove			

(Attach add	g or adding additi itional sheets, if nee	ionai Artic cessarv).	(Be specific)	<u>nige(s) nere</u> .				
N/A		•	• •					
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F. <u>If an amen</u>	dment provides fo	r an exchi	ange, reclassi	fication, or c	ncellation of	<u>issued shares</u>	1	
provisions (if pay	s for implementing tapplicable, indica	<u>the amen</u> w AZAA	<u>idment if not</u>	contained in	the amendme	<u>at itself:</u>		
N/A	арунсалс, таса	R 14 11 j						
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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : _		<u>.</u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this de Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	 .	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	er
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/15 Dated	12018	
(By sele	a director president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other coubinted fiduciary by that fiduciary)	
	Merlin Izquierdo Perez	
	(Typed or printed name of person signing)	<u> </u>
	President	
	(Title of person signing)	