P12000330666

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GUACHINANGO	USA CORPORATION					
DOCUMENT NUME							
	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
	EMILIANO SUAREZ						
		Name of Contact Person	n				
	GUACHINANGO USA CORPORATION						
		Firm/ Company					
	656 ADRIANE PARK						
		Address					
	KISSIMMEE FL 34744						
		City/ State and Zip Code	e				
	E-mail address: (to be us	sed for future annual report	notification)				
	, , , , , , , , , , , , , , , , , , , ,		,				
For further information	concerning this matter, pleas	se call:					
EMILIANO SUAREZ		at (786					
Name of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check for	r the following amount made	navable to the Florida Dena	artment of State:				
Entroped is a shock to	the following amount made	payaolo to the Florida Dept	in the or other.				
■ \$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)				
Mailing Address		Street Address					
Amendment Section		Amendment Section					
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building					
Tallahassee, FL 32314		2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GUACHINANGO USA CORPORATION

(Name of Corporation P12000030666	on as currently filed with the Florida Dept. of State)
	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	
	The new d "corporation," "company," or "incorporated" or the abbreviation ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>	
	ATT 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	
	<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Reg	(City) (Zip Code)
Sign	ature 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 Do	<u>e</u>			
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title		Name	<u>Addres</u> s		
1) Change	S/T	_	LUCY SUAREZ	656 ADRIANE PARK		
Add				KISSIMMEE FL 34744		
X Remove						
2) Change		_				
Add						
Remove						
3) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change						
Add						
Remove						
6) Change		<u></u>				
Add						
Remove						

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)		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
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	provisions for implementing the amendment if not contained in the amendment itself:	
	·	

The date of each amendment(s) adoption: date this document was signed.	, 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 block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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.	1
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt .
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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.	
10/02/2015 Dated	
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)	
EMILIANO SUAREZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	