P12000075906

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SECRETARY OF STATE NS OIVISION OF CORPORATIONS

OCT 2 9 2012

T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

	NI MEVICANI DE	SCTALIDANT INC
NAME OF CORPORATION: CASA LEC		STAURANT INC
DOCUMENT NUMBER: P 1200007590	06	
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	itter to the following:	
REYNALDO GRI	NSTEIN	
	Name of Contact Persor	1
ARMOR INS. AG	SENCY	
	· Firm/ Company	
2631-A JAMMES	RD	
	Address	
JACKSONVILLE	,FL 32210	
	City/ State and Zip Code	
ALOPOCHO@AOL.	СОМ	
E-mail address: (to be us	sed for future annual report	notification)
•	r ^a)	
For further information concerning this matter, pleas	se call:	·
REYNALDO	at (904	, 779-2777
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisie Clitton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec. FL 32301

Articles of Amendment to Articles of Incorporation of



CASA LEON MEXICAN RESTAURANT INC

(Name of Corporation as cur P12000075906	rrently filed with the Flo	rida Dept. of State)		
	umber of Corporation (if k	nown)		
Pursuant to the provisions of section 607,100 its Articles of Incorporation:	6, Florida Statutes, this <i>FI</i>	orida Profit Corporation	adopts the following	g amendment(s) to
A. If amending name, enter the new name	of the corporation:			
				_The new
name must be distinguishable and contain "Corp" "Inc.," or Co.," or the designation word "chartered." "professional association	on "Corp," "Inc," or "Co	". A professional corpo		
B. Enter new principal office address, if a (Principal office address MUST BE A STRE				-
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF I</u>				
				-
D. If amending the registered agent and/o new registered agent and/or the new re		s in Florida, enter the n	ame of the	-
Name of New Registered Agent	Lean Torru	s, Salvad	6	
	(Florida stree	address)	_	
New Registered Office Address:	(Citv)	, Floric	da(Zip Code)	-
	(Спу)		(Zip Code)	
New Registered Agent's Signature, if chan		h and amont the obligati	our of the position	

Signature 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 <math>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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u> Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	REGISTER AGEN	LEON TORRES SALVADOR	2260 MAYPORT RD
Add		***************************************	JACKSONVILLE,FL 32233
Remove			
2) X Change	PRESIDENT	LEON TORRES SALVADOR	SAME ADDRESS
Add			
Remove 3) X Change	VP	LEON TORRES ANA	SAME ADDRESS
Add			
Remove			
4) X Change	<u>S</u>	LEON TORRES NANCY	SAME ADDRESS
Add			
Remove	•		
5) Change	*****		
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

	r adding additional A nal sheets, if necessary). (Be specific)			
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The date of each amendment(s) a	doption: 10/12/2012
Effective date if applicable: 10	0/12/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 10/22	/2012
Signature	Mu
(By a c selecte	director, president weather officer—if directors or officers have not been ed, by an incorporator—if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	REYNALDO GRINSTEIN
	(Typed or printed name of person signing)
	INCORPORATOR
	(Title of person signing)