Notes Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000245049 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FASTKIT CORP Account Number : I2010000009 Phone : (305)599-0839

Fax Number : (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

COR AMND/RESTATE/CORRECT OR O/D RESIGN EL NUEVO JUANA CAFE INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help AUG 1 9 2019

C Kinsey

Articles of Amendment to Articles of Incorporation of

=1	. NUEV	$I \cap \Pi$	T A 'A ' A	CAPE	DIC

BU NUEVO JUANA CAFE INC					
(Name of Corpora	ation as currently filec	with the Flori	da Dept. of State)		
P12000081384					
			 		
(Doc	sument Number of Corp	oration (if know	n)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Florid</i>	la Profit Corpoi	ntion adopts the fo	ollowing ame	ndment(s
A. Hamending name, enter the new name of the	anymovation.	!			
with the state of the state of the state of the	LOT DATACION.	i			
				The	אושת
name must be distinguishable and contain the w "Corp" "Inc.," or Co.," or the designation "Co. word "chartered," "professional association," or th	rp." "Inc," or "Co".	company," or A professional	'incorporated" or corporation name	the abbrevi must contai	ation n the
B. Enter new principal office address, if applical	ble:			•	
(Principal office address MUST BE A STREET AL					
· · · · · · · · · · · · · · · · · · ·					
] i			
		i			
C. Enter new mailing address, if applicable:		i			
(Mailing address MAY BE A POST OFFICE B	B <i>OX</i>)	i			
		· ·			
					<u></u>
		İ		_;F€	201
				- ≥∵ -	
D. If amending the registered agent and/or regist	tered office address in	Florida, enter	the name of the		AUG
new registered agent and/or the new registere	ed office address:	- 1		<u> </u>	
Name ad National Action				<u> بحر</u>	9
Name of New Registered Agent		 ;			D
				P5.	
	(Florida street add	ress) i			ö
		1			ယ
New Registered Office Address:		<u>-</u>	, Florida	<u> </u>	
	(City)	İ		(Zip Code)	
		į			
New Registered Agent's Signature, if changing Re	egistered Agent:	i			
hereby accept the appointment as registered agent.	. I am familiar with an	d accept the obj	igations of the pos	ition	
		!			
		i			
		1			
Sig	gnature of New Register	ed Agent, if cha	nging		
•			- 0		

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 PT John Doc X Remove <u>y</u> Mike Jones X Add <u>sv</u> Sally Smith <u>Addres</u>s Type of Action Title Name (Check One) VP ANGELES, JUANA 18841 NW 23 PLACE 1) ____ Change PEMBROKE PINES, FL 33029 ____ Add _ Remove 2) ____ Change __ Add Remove 3) ____ Change __ Add ____ Remave 4) ____ Change Add __ Remove 5) ____ Change ____ Add ____ Remove ග ___ Change

____ Add

____ Ramove

mach additional sheets, if necessary). (Be specific)	!
	i
f an amendment provides for an exchange, reclassification, or cancel provisions for implementing the amendment if not contained in the s	llation of issued shares, amendment itself:
(if not applicable, indicate N/A)	

08/15/2019	if other than the
The date of each amendment(s) adoption:date this document was signed.	
Effective date if applicable: (no more than 90 days after amendm	ent lije date)
·	
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes can by the shareholders was/were sufficient for approval.	st for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	The following statement he amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for appr	oval
by(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	ion and shareholder
08/15/2019 Dated	
Signature (By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	officers have not been ir, trustee, or other court
PABLO ALMONTE	;
(Typed or printed name of person sign	ning)
PRESIDENT	!
(Title of person signing)	