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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG -2 2013

EXAMINER

## COVER LETTER

TO:	Amendment Section
,	Division of Corporations

NAME OF CORPORATION: ENCANTADA #2 RESTAURANT, Inc.				
DOCUMENT NUMBER: P13000031807				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:		
	CAMILO GARCIA			
		Name of Contact Person		
•	<b>ENCANTADA #2</b>	RESTAURANT	, Inc.	
		Firm/ Company		
	3174 NW 7th Stre	eet		
		Address		
	Miami, FL 33125			
City/ State and Zip Code				
Semabe75@yahoo.com				
E-mail address: (to be used for future annual report notification)				
	(	•	,	
For further information	n concerning this matter, pleas	e call:		
Camilo Garc	ia	at ( 305	794-6097	
Name of Contact Person Area Code & Daytime Telephone Nu			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	ertment of State:	
□ \$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)	
Ma	iling Address	Street	Address	
Am	endment Section		ment Section	
	rision of Corporations	Division of Corporations		
	). Box 6327	Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

## **Articles of Amendment** to Articles of Incorporation

FILED 13 JUL 30 PM 1:58

## **ENCANTADA #2 RESTAURANT, Inc.**

(Name of Corporation as currently filed with the Florida Dept. of State)

ndment(s) to

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp,," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must cont word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  CAMILO GARCIA  2954 NW 14th Street  (Florida street address)	P13000031807		22,72
A. If amending name, enter the new name of the corporation:  The same must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevaction, "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contword "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS   Miami, FL 33125  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   CAMILO GARCIA	(Documen	nt Number of Corporation	(if known)
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must cont word "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS  Miami, FL 33125  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Miami, FL 33125  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  CAMILO GARCIA  2954 NW 14th Street  (Florida street address)		1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following ame
mane must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contour "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  CAMILO GARCIA  2954 NW 14th Street  (Florida street address)	A. If amending name, enter the new na	ame of the corporation:	
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent (Florida street address)	"Corp.," "Inc.," or Co.," or the design	ation "Corp," "Inc," or	"Co". A professional corporation name must contain
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  CAMILO GARCIA  2954 NW 14th Street  (Florida street address)	3. Enter new principal office address.	if applicable:	3174 NW 7th Street
Miami, FL 33125  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   CAMILO GARCIA     2954 NW 14th Street     (Florida street address)			Miami, FL 33125
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Miami, FL 33125  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  CAMILO GARCIA  2954 NW 14th Street  (Florida street address)			3174 NW 7th Street
Name of New Registered Agent  2954 NW 14th Street  (Florida street address)			Miami, FL 33125
Name of New Registered Agent  2954 NW 14th Street  (Florida street address)			
Name of New Registered Agent  CAMILO GARCIA  2954 NW 14th Street  (Florida street address)			
2954 NW 14th Street  (Florida street address)	new registered agent and/or the ne		
(Florida street address)	Name of New Registered Agent		<del></del>
· · · · · · · · · · · · · · · · · · ·		2954 NW 14th	Street
MIAMI 33 120		•	,
New Registered Office Address:	New Registered Office Address:		Florida 33125
(City) (Zip Code)		(CII	y) (21p Coae)
	hereby accept the appointment as regis	tered agent. I am familia	r with and accept the obligations of the position.
		Assist.	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Si	gnature of New Registered	d 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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P/T	Jorge L. Arroliga	3174 NW 7th Street
Add			Miami, FL 33125
X Remove			
2) Change	VP/S	Julio C. Garcia	3174 NW 7th Street
Add			Miami, FL 33125
X Remove			
3) Change	Р	Camilo Garcia	3174 NW 7th Street
X			Miami, FL 33125
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del> </del>		
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an excl provisions for implementing the ame	nange, reclassifica	tion, or cancel	lation of issued	<u>l shares,</u> elf:
(if not applicable, indicate N/A)				
	·			· · · · · · · · · · · · · · · · · · ·
	<u></u>	·		
		•		

•	. 07/23/2013	FILED
The date of each amendment(s)	adoption: 07/23/2013	13 JUL 30 PH 1: 58
	7/23/2013	SECRETARY OF CIT
<u></u>	(no more than 90 days after amen	SECRETARY OF STATE adment file date, LAHASSEE, FLORIDA
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes sufficient for approval.	cast for the amendment(s)
	pproved by the shareholders through voting group for each voting group entitled to vote separately of	
"The number of votes ca	st for the amendment(s) was/were sufficient for ap	pproval
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder a	ction and shareholder
07/2	23/2013	
Signature *	and	
(By a	director president or other officer - if directors of	
	ted, by an incorporator – if in the hands of a recei inted fiduciary by that fiduciary)	ver, trustee, or other court
e	Jorge L. Arroliga	
	(Typed or printed name of po	erson signing)
	President	
	(Title of person sign	ing)