(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · ·
(Cit	y/State/Zip/Phone	» #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	





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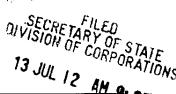
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RESTAURANT	E EL RINCON DE LO	S ENAMORADOS INC
DOCUMENT NUMB	ER: P1300005092	20	
The enclosed Articles	<i>Of Amendment</i> and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	, N	IIRIAM PACHEO	
		Name of Contact Person	1
•		Firm/ Company	
		P.O BOX 2913	
		Address	
	FOR	T MYERS FL, 3	3902
		City/ State and Zip Cod	e
.	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
MIRIAM PAC	HECO	at (239	334-4191 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable 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 Indment Section Indicate the section of Corporations Indicate the section of Corporations Indicate the section of Corporation of	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



RESTAURANTE EL RINCON DE LOS	ENAMORADOS_ONC	AM O.
(Name of Corporation as current	ly filed with the Florida Dept. of State) AM 9: 27
P13000050	920	
(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flo ts Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment(s)
A. If amending name, enter the new name of th	e corporation:	
		The new
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A professional	"incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
	····	
D. If amending the registered agent and/or reg	istered office address in Florida, enter	the name of the
new registered agent and/or the new registe	red of fice address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
New Registered Office Address.	(City)	, Florida(Zip Code)
		•
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: ont. I am familiar with and accept the of	bligations of the position.

Signature of New Registered Agent, if changing

address of each Officer (Attach additional sheets, Please note the officer/dip P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or D if necess rector titl President Chief l r, Directo in the fo wes the c	irector being added: ary) e by the first letter of the office title: : T= Treasurer; S= Secretary; D= Directo. Financial Officer. If an officer/director holor would be PTD. Howing manner. Currently John Doe is listed proporation, Sally Smith is named the V and	th officer/director being removed and title, name, and T : $TR = Trustee$; $C = Chairman$ or $Clerk$; $CEO = Chief$ T ds more than one title, list the first letter of each office T as a T days the T and T dike Jones is listed as the T . There is T and T dike T does should be noted as T does T as a T change,
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	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	V	MIRNA I. ESPINAL	1669 ALTON RD
X Add			PORT CHARLOTTE FL, 33952
Remove	,		
2) Change			
Add			
Remove			
3)Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

_ Add

__ Remove

Lattuch additional sheets, if necessary). (Be specific)

Stock owned or percentage of ownership
Total number of shares or percentage of ownership: 100%
Miriam Pacheco: 50%
Mirna I. Espinal: 50%

The date of each amendment(s) ac	doption: 06/28/2013
Effective date <u>if applicable</u> : 06	/28/2013
Directive date it applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
☐ The amendment(s) was/were appropriately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 06/28/	2013/
s: (x//)	Maine in the second
Signature (By a g	Arector, president or other officer - if directors or officers have not been
selegie	d, by an incorporator — If in the hands of a receiver, trustee, or other court
appoin	ted fiduciary by that fiduciary)
	MIRIAM PACHECO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)