## P13000091745

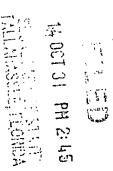
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TA		ISSIMMEE, INC	D
The enclosed Articles of Amendment			
Please return all correspondence conce	erning this matt	er to the following:	
PEDRO A	A RIVER	Α	
		Name of Contact Persor	1
PEDRO I	RIVERA	& ASSOCIATES	S
		Firm/ Company	
2752 MIC	CHIGAN	AVE	
		Address	
KISSIMM	IEE, FL 3	34744	
•	<u>_</u>	City/ State and Zip Cod	2
PRIVSEP@	VAHOO I	COM	
		ed for future annual report	nutification)
D-man ade	ireas. (to be usi	or future annual report	inamedia)
For further information concerning thi	s matter, please	e call:	
	·		050 0550
PEDRO RIVERA		at ( <u>407</u>	350-2556
Name of Contact Person		at (407 ) 350-2556  Area Code & Daytime Telephone Number	
Enclosed is a check for the following a	amount made p	ayable to the Florida Depa	artment of State:
	Filing Fee & ate 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 Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TAPATIO KISSIMMEE, INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P13000091745	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	, amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must convord "chartered," "professional association," or the abbreviation "P.A."	The new breviation ontain the
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)	<u>i</u>
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	- P
(Florida street address)	PH (1)
New Registered Office Address: Florida (City) (Zip Code)	៍
(City) (Zip Code)  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.	

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 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>	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	VD	MARIA M MONTOYA	1804 W VINE ST
Add			KISSIMMEE, FL 34741
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
	-		
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 exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassificati	on, or cancellation	on of issued share idment itself:	<u>:S.</u>
			<u> </u>	
				<del></del> .
			_	

The date of each amendment(s) a	doption:	_, if other than the
date this document was signed.		
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adby the shareholders was/were se	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):	
	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_10/28/2	2014	
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	EDGAR O PANTOJA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	