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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: 504 COQUITO'S	HONDURAS RESTAU	IRANT AND BAR INC
DOCUMENT NUMB	ER:		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
1	NICK FANELALA		
-		Name of Contact Pers	on
1	NR FANELLA & CO INC		
_		Firm/ Company	
4	134 TANGLEWOOD DR		
_		Address	
F	T, WALTON BEACH FL	32547	
-		City/ State and Zip Co	de
1	VFANELLA@COX.NET		
_		sed for future annual repo	rt notification)
For further information	concerning this matter, plea	se call:	
NICHOLAS R. FANE	LLA	at (	862-7131
Name of	Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida De	partment 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)
Amer Divis	ng Address adment Section ion of Corporations Box 6327	Ame Divis The	et Address Indiment Section Ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

504	COOI	HITC	YS HO	ANDURAS	RESTAURAN'		RAR	INC
JU-+		$\cup$	<i>,</i> 20 P/	JINDURAS	LES INDEAN	עמא ו		HAC

(Name	of Corporation as currently filed	with the Floride Dept. of Cta	
P14000022744	or Corporation as currently med	with the Fiorida Dept. of Sta	<u>.te</u> )
	(Document Number of Corpo	oration (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	·	,	e following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
	<del> </del>		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A profe		
B. Enter new principal office address,			<del></del>
(Principal office address MUST BE A S	TREET ADDRESS )		1020 17A
	_		
C. Enter new mailing address, if appl	<u>icable:</u>		SSS
(Mailing address MAY BE A POST	OFFICE BOX)		— in =
			The Co
			Fi &
	<del></del>	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent an new registered agent and/or the ne		Florida, enter the name of th	<u>ie</u>
	NICHOLAS R. FANELLA		
Name of New Registered Agent			<del></del>
	434 TANGLEWOOD DR		
	(Florida street addi	ress)	
New Registered Office Address:	FT WALTON BEACH	, Florid	_32547 a
·	(City)		(Zip Code)
New Registered Agent's Signature, if o	hanging Registered Agent:		
I hereby accept the appointment as register	ered agent. I am familiar with an	d accept the obligations of the	position.
	Wir holos /	Frendle	<i>1</i> , , , , , , , , , , , , , , , , , , ,
C	Signature of New Redister	ed Agent, if changing	
Check if applicable  ☐ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11) (e), F.S		
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of di	rectors without shareholder ac	tion and shareholder

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)

Example:

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.

X_Change	<u>PT</u>	John Do	<u>De</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Şr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	٧	_	JORGE ORTIZ	9902 THOMAS DR
Add	<del></del>	_		PANAMA CITY FL 32459
X Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change				<u> </u>
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add			· <del></del>	
Remove				

	(Be specific)	
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	1	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be fisted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
JANUARY 15, 2020 Dated Signature	
(By a director, president or other officer - if directors or officers have not bee	
selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	ourt
GRACE MACIAS	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	<del></del>