P140000 42703

(Req	uestor's Name)	
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A Municipality

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DELICATESSEN	LA ESPERANZA, INC.	
DOCUMENT NUMB	P4000042703		
The enclosed Articles of	of Amendment and fee are so	bmitted for filing.	
Please return all corresp	nondence concerning this ma	itter to the following:	
j	IUAN M. SAMPOL		
-		Name of Contact Perso	n
I	DELICATESSEN LA ESPERANZA, INC.		
-		Firm/ Company	
Ç	9318 SW 222 WAY		
-	· -	Address	
(JUTLER BAY, FL. 33190		
		City/ State and Zip Cod	ਦ <u>-</u>
juanme	squidasampol@gmail.com		
<u>-</u>		sed for future annual report	notification)
For further information JUAN M. SAMPOL	concerning this matter, pleas	se call: 786 at (356-0776
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Amen Divisi P.O. F	ng Address dinent Section on of Corporations Box 6327 bassee, FL 32314	Amend Divisio Clifton 2661 F.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation

of

DELICATESSEN LA ESPERANZA, INC.			
(Name of Corporation as curren	ntly filed with the F	forida Dept. of State)	
14000042703			
(Document Number	of Corporation (if k	nowπ)	
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is <i>Florida Profit Co</i>	rporation adopts the following amo	endment(s) t
If amending name, enter the new name of the corporation:			
VA		The	new
ame must be distinguishable and contain the word "corporal Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professio 1 "P.A."		
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A		
			<u></u>
. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	N/A		
			<u>:</u>
			<u>-</u> :
. If amending the registered agent and/or registered office ad		ter the name of the	P:: 3: 55
new registered agent and/or the new registered office address Name of New Registered Agent N/A	<u> </u>		<i>ر</i> ۱
(F)			
	street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	

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	<u>PT</u>	<u>John Doc</u>	
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	<u>v</u>	YAUMARA SOLER	1220 HAND AVE SUITE C
XX Add			ORMOND BEACH, FL. 32174
Remove			·
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		.	
Add			
Remove			

E. <u>If a</u> (Att	mending or adding additional Arth ach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A		
	· · · · · · · · · · · · · · · · · · ·	
		•
F. <u>If a</u>	n amendment provides for an exchange is a managementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
N/A		

	8-12-2019	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 9t) days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east 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):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
, -	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
action was not required. 8-13-2019 Dated Signature	In	_
sciecto	irrector, 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 ated fiduciary by that fiduciary)	
	JUAN M. SAMPOL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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