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(R	equestor's Name)	
(Address)		
(Address)		
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PICK-UP	☐ WAIT	MAIL
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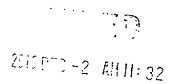
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Delicatessen La Esp	peranza, Inc.	
DOCUMENT NUMBER: P4000042703		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Juan M. Sampol		
	Name of Contact Person	
Delicatessen La Esperanza, Ir	IC.	
 -	Firm/ Company	
23 WESTGRILL DRIVE		
	Address	
PALM COAST, FL 32164		
	City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
juanmesquidasampol@gmail.com		
	ed for future annual report	archite. rath and
13-Hall address, the occus	ed tor thirte aimmar report	normeation)
For further information concerning this matter, pleas	e call:	
Juan M. Sampol	786 at (356-0776 de & Daytime Telephone Number
Name of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
\$35 Filing Fee & Certificate of Status	☐S43.75 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 Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building vecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of



DELICATESSEN LA ESPERANZA, INC.

(Name of Corporation as curr	ently filed with the Florida Dept. of State)	
P14000042703	:	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation $\wp _{\mathcal{R}}$		
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	23 WESTGRILL DRIVE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	PALM COAST, FL 32164	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	23 WESTGRILL DRIVE	
	PALM COAST, FL 32164	
D. If amending the registered agent and/or registered office and registered agent and/or the new registered office add		
Name of New Registered Agent N/A		
indirectly free heganized figure		
Florid	la street address)	
New Registered Office Address: N/A	. Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		
NA		
Signature of No	ew 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:

 $P = President; \ V = Vice President; \ V =$

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>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	٧	YAUMARA SOLER	1220 HAND AVE SUITE C
Add			ORMOND BEACH, FL. 32174
XX Remove			
2) Change			
Add			
Remove			
3) Change			··
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	
Ađd			
Damara			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icies, enter change(s) here: (Be specific)
N/A	
F. If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) a	11-19-2019 doption:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	plock does not meet the applicable statutory filing requirements, the partment of State's records.	his date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendatificient for approval.	nent(s)
	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s)	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	opted by the board of directors without shareholder action and share	cholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and sharehold	ler
Dated		
Signaturd X) \-		
selecti	Mrector, president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or othe sted fiduciary by that fiduciary)	
	JUAN M. SAMPOL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· · · · · · ·