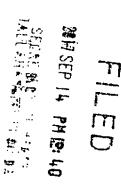
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Amend

SEP 15 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AMC MEXIC	AN FOODS INC
DOCUMENT NUMBER: P14000063750	
The enclosed Articles of Amendment and fee at	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
David Marquez Carbajal	
AMC Mexican Foods In	Name of Contact Person
2894 Tamiami Trail E	Firm/ Company
Naples FL 34112	Address
	City/ State and Zip Code
marquez_jacl@yahoo.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	 slease call:
David Marquez Carbajal	at (239 878-1967
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	 ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ANIC Mexican roods inc]]					
(Name	of Corpora	tion as currentl	y filed with the Fl	orida Dept. of Stat	<u>e)</u>	
P14000063750						
	II I/Doci	iment Number o	f Corporation (if kr	noum)		
	1	ament (vanioe) o	i Corporation (ii ki	10 1117		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006 Flori	da Statutes, this	Florida Profit Cor	poration adopts the	following	amendment(s) to
A. If amending name, enter the new n	 ame of the	corporation:				
	11	_				
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ration "Cor	p. " "Inc. " or "	Co". A profession	r "incorporated" nal corporation nat	or the abb	The new previation ontain the
B. Enter new principal office address,	if applicab	le:				
(Principal office address MUST BE A S						
	11		-			
					72 60	
			-		and len	S TI
C. Enter new mailing address, if appl						中 二
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE B</u>	<u>(OX</u>)			्रे.स्ट	= [
					JE.	_ m
					-;	3 , , ,
					- #-	_
D. If amending the registered agent an		arad office uddr	naccia Elopida ant	on the name of the	स्य मृत्यू अस्य	t o
new registered agent and/or the ne				er the name of the	199	C C
	İl	rquez Carbajal	•			
Name of New Registered Agent			-	·		
	323 Horra	ine Dr				
	i	(Florida str	eet address)			
New Registered Office Address:	Fort Myer	s		. Florida	33905	
New Negistered Vyfice Address.	- 	<u></u>	(City)	, Fidrida	(Zip Co	ode)
			•			•
New Registered Agent's Signature, if c	 hanging Ro	egistered Agents				
I hereby accept the appointment as regist	ered ageni.	l am familiar v	vith and accept the	obligations of the p	osition.	
	$ \parallel$	1				
66	aural)	.		_		
	Sig	nature of New R	egistered Agent, if	changing		

				officer/director being removed and title, name, and
address of each Offic			added:	
(Attach additional shee				
Please note the officer, P = Praxidom: V = Vie				TR= Trustee; C = Chairman or Clerk; CEO = Chief
Executive Officer: CF held. President, Treast Changes should be not a change, Mike Jones Mike Jones. V as Rema	O = Chief . urer, Direct ted in the fo leaves the c	Financial Office or would be Pi Illowing manne corporation. Sa	cer. If an officer/director holds TD. er. Currently John Doe is listed ally Smith is named the V and S.	more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
Example: 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> Nar</u> 	<u>me</u>	<u>Addres</u> s
1) Change	P		ustin Marquez Carbajal	446 Lorraine DR
Add				Fort Myers, FL 33905
X Remove				
2) Change	P	 	vid Marquez Carbajal	323 Lorraine Dr
X Add				Fort Myers, FL 3305
Remove				
3) Change		<u> </u>		
Add			12	
Remove				
4) Change		_		
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				-
Add				

____ Remove

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
If an amandment provides for an arch.	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
) i

	 8/01/2017
The date of each amendment(s) adoption: _ late this document was signed. 08/61/2017	The other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the state's records.
Adoption of Amendment(s) (C	HECK ONE)
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each votion	the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the am	 endment(s) was/were sufficient for approval
by	<u> </u>
(1	oling group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder
08/31/17 Dated	<u>' </u>
Signature (
selected, by an ir	esident or other officer – if directors or officers have not been accorporator – if in the hands of a receiver, trustee, or other court arry by that fiduciary)
· ·	arquez Carbajal
	(Typed or printed name of person signing)
Presiden	· [
	(Title of person signing)