# P140000 924602

Office Use Only



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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: SABORES LATIN	NOS RESTAURANT, COR	<u>r</u>
DOCUMENT NUMB			
	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	sondence concerning this ma	itter to the following:	
	YURELYS CASTILLO		
_		Name of Contact Person	1
	SABORES LATINOS RETA	AURANT CORP	
_		Firm/ Company	
;	S501 EAST 10TH CT		
_		Address	
I	HALEAH FL 33013		
-		City/ State and Zip Cod	<u></u>
VHDE	LYSD@YAHOO.COM		
TOKE		sed for future annual report	notification)
	E-man address, (10 be us	sed for future annual report	ROTHERION
For further information	concerning this matter, pleas	se call:	
YURELYS CASTILLO	)	at ( <u>786</u>	681-3384
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Maili	ing Address	Street	Address
Amer	ndment Section	Amendment Section	
	ion of Corporations	Division of Corporations	
	Box 6327 hassee FL 32314		Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

#### Articles of Incorporation

of

#### SABORES LATINOS RESTAURANT CORP

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F. 1	<b>1</b>	معين	-

(Name o	of Corporation as currently filed with	the Florida Dept. of State)
	P14000092462	2819 4世6 26 四 中国
	(Document Number of Corporation	on (if known)
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Pro</i>	of the Corporation adopted the following amendment
. If amending name, enter the new na	nme of the corporation:	
//A		The new
	ation "Corp," "Inc," or "Co". A pr	any," or "incorporated" or the abbreviation of ofessional corporation name must contain the
Enter new principal office address, Principal office address MUST BE A S		
The pur office address Stoot 192.15		
. Enter new mailing address, if appli		
(Mailing address <u>MAY BE A POST</u>	OFFICE BON)	<del>-</del>
. If amending the registered agent an	d/or registered office address in Flor	ida, enter the name of the
new registered agent and/or the new	v registered office address:	
Name of New Registered Agent	YURELYS CASTILLO	
	3501 E 10TH CT	
	(Florida street address)	
New Registered Office Address:	HIALEAH	, Florida
<u>New Registerea Office Address:</u>	(City)	(Zip Code)
	·	·
ew Registered Agent's Signature, if c	hanging Registered Agent:	
nereby accept the appointment as regist		cept the obligations of the position.
	(S, D)	
( (	11) 12	
	27 AV 10 AV	and the first
	Signature of New Registered A	gent, ij enanging

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Cl. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officel. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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>Name</u>	<u>Addres</u> s
I) Change	PD	BARBARA LINARES	3501 EAST 10TH CT
Add			HIALEAH FL 33013
X Remove			
2) Change	PD	YURELYS CASTILLO	3501 EAST 10TH CT
X Add			HIALEAH FL 33013
Remove			
3 ) Change		<del></del>	
Add			<del>-</del>
Remove			
4) Change	_		
Add			
Remove			
5) Change			<u></u>
Add			<u>_</u>
Remove			
δ) ("h			
6) Change		<del>_</del>	
Add			
Remove			

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

	07/16/2019	
	· · · · · · · · · · · · · · · · · · ·	, if other t
date this document was signed		
Effective date if applicable:	07/16/2019	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be liste
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	···	
,	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the hoard of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
07/16	/2019	
Dated		
,	(I) W	
Signature _	2007.	
	By a director, president or other officer - if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
aj	ppointed fiduciary by that fiduciary)	
	YURELYS CASTILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	