P15000038743

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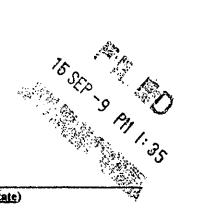
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	MANGIARE FOO	DS CORPORATION	
DOCUMENT NUME	D15000039743		-
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Alvaro Castillo		
•	530	Name of Contact Perso	n
	Castillo & Associates		
•	100000000000000000000000000000000000000	Firm/ Company	
	1390 Brickell Avenue Suite 2	200	
		Address	
	Miami, FL 33131		
		City/ State and Zip Cod	le
alvaro	@alvarocastillopa.com		
arvarc		sed for future annual report	notification)
	is man address, (to be as	sou for future annual report	Notheationy
For further information	n concerning this matter, pleas	se call:	
Alvaro Castillo		at (305	371-5540 ode & Daytime Telephone Number
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	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)
Ame Divi P.O.	ting Address endment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Division Cliftor	Address dment Section on of Corporations n Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of



MANGIARE FOODS CORPORATION

D1 60000000000	Corporation as current	tly filed with the Florida Dept. of State)
P15000038743		
**************************************	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new nam	e of the corporation:	
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designate word "chartered," "professional association	ion "Corp," "Inc," or	The new on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		8300 NW 53 Street Suite 350
		Doral, FL 33166
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	FFICE BOX) or registered office add	Doral, FL 33166 Less in Florida, enter the name of the
D. If amending the registered agent and/ new registered agent and/or the new re	registered office addres	
D. If amending the registered agent and/new registered agent and/or the new p	registered office addres Ivan Zaral	-
new registered agent and/or the new r		Σ
new registered agent and/or the new r	Ivan Zaral 8300 NW 53 St	Σ
new registered agent and/or the new r	Ivan Zaral 8300 NW 53 St	reet Suite 350 rees address)

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 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> <u>Jot</u>	ın Doe	
X Remove	Y. Mi	ke Jones	
_X Add	<u>SV</u> Sai	ly Smith	
Type of Action (Check One)	Title	Name	Address
l) X Change	D	Carla Liza Vaccari	8300 NW 53 Street Suite 350
Add			Doral, FL 33166
Remove			
2) Change	PD	Ivan Zarak	8300 NW 53 Street Suite 350
X Add			Doral, FL 33166
Remove			
3) Change	***************************************		
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pemoue			

I amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
-	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	tange, reclassification, or cancellation of issued shares, and and an amendment itself:

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 date we document's effective date on the Department of State's records.	ill not be listed 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(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated $9/7/15$	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Carla Liza Vaccari	
(Typed or printed name of person signing)	<u></u>
Director	
(Title of nercon signing)	