

PIS 0000 68931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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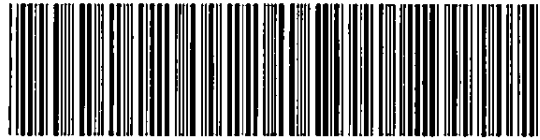
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 18, 2024

ROBERTO SANTONI ESQ  
941 LAKE BALDWIN LANE SUITE 100  
ORLANDO, FL 32814

SUBJECT: BRISAS BAKERY AND RESTAURANT INC  
Ref. Number: P15000068931

We have received your document for BRISAS BAKERY AND RESTAURANT INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN  
Regulatory Specialist II

Letter Number: 524A00015775

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# FLORIDA IN-HOUSE COUNSEL LAW GROUP

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BRISAS BAKERY AND RESTAURANT INC.

DOCUMENT NUMBER: P15000068931

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto Santoni, Esq.

Name of Contact Person

Santoni Law, P.A., d/b/a Florida In-House Counsel Law Group

Firm/ Company

941 Lake Baldwin Lane, Suite 100

Address

Orlando, Florida 32814

City/ State and Zip Code

rsantoni@fihclawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roberto Santoni

at ( 407 ) 233-3490

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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FILED

407.233.3490

941 LAKE BALDWIN LANE - SUITE 100  
ORLANDO, FL 32814  
FihClawGroup.com



Articles of Amendment  
to  
Articles of Incorporation  
of

BRISAS BAKERY AND RESTAURANT INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000068931

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_

\_\_\_\_\_

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_

\_\_\_\_\_

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent Santoni Law, P.A.

941 Lake Baldwin Lane, Suite 100

(Florida street address)

New Registered Office Address: Orlando, Florida 32814

(City)

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*



Signature of New Registered Agent, if changing

**Check if applicable**

The amendment(s) is/are being filed pursuant to s. 607.0120 (1) (c), F.S.

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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:

- Change            PT     John Doe
- Remove            V     Mike Jones
- Add                SV     Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	P	Javier Pineda	11570 S. Orange Blossom Trail #11 Orlando, Florida 32837
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	PST	Ricardo Panneflek	52 Riley Road, Suite 393 Celebration, Florida 34746
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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**E. If amending or adding additional Articles, enter change(s) here:**

(Attach *additional sheets, if necessary.* (Be specific)

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**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)

Stocks certificates CS-1 and CS-2 are cancelled, and replaced by CS-3.

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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 03/02/2011 BY 60322 UCBAW

06/01/2024

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

06/01/2024

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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

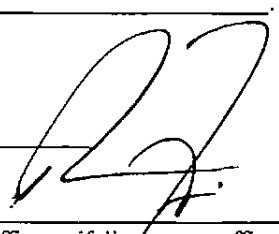
- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- 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 \_\_\_\_\_"  
(voting group)

Dated 06/01/2024

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)

Ricardo Panneflekk

(Typed or printed name of person signing)

PST

(Title of person signing)

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SECRETARY OF STATE  
TALLAHASSEE, FL