## P15000069380

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(Address)	
(Address)	
(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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## COVER LETTER

TO: Amendment Se Division of Cor	rporations		91915	[ : ] .
NAME OF CORP	ORATION: ANDREAS CAFE	TERIA & COFFE SHOP II	NC	
DOCUMENT NUM	IBER: P15000069380			
	es of Amendment and fee are su			
	respondence concerning this ma			
Please lettiri aii con	respondence concerning was ma			
	RAFAEL VASCONEZ			-
		Name of Contact Persor	1	
	REV MULTI SERVICE INC			-
		Firm/ Company		
	16499 NE 19 AVE SUITE 2			-
	NO 141 EL 221/2	Address		
	MIAMI, FL. 33162	City/ State and Zip Code		-
		City/ State and Zip Code	•	
	REVMULTISERVICE@AO			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informat	ion concerning this matter, plea	se call:		
RAFAEL VASCON	NEZ	at ( 305	7885207	
Name	e of Contact Person	Area Co	) de & Daytime Telephone Numbe	r
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:	
■ \$35 Filing Fee	☐\$43.75 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)	
Ai Di P.(	ailing Address nendment Section vision of Corporations O. Box 6327 illahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303	



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2021

RAFAEL VASCONEZ REV MULTI SERVICE INC 16499 NE 19 AVE - STE. 218 MIAMI, FL 33162

SUBJECT: ANDREA'S CAFETERIA AND COFFEE SHOP INC

Ref. Number: P15000069380

We have received your document for ANDREA'S CAFETERIA AND COFFEE SHOP INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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.

Letter Number: 021A00001692

Irene Albritton Regulatory Specialist II

www.sunbiz.org

## Articles'of Amendment to Articles of Incorporation of

ANDREAS CAFETERIA & COFFEE SHOP INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P15000069380	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	ollowing amendment(s'
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 abbit "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	~.a
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
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:	ળ
Name of New Registered Agent	
(Florida street address)	
N I.	
New Registered Office Address:, Florida	(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 pos	sition.
Thereby accept the appointment as registered agent. Than juminal with and accept the stongations of the pre-	
Signature of New Registered Agent, if changing	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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)

Example:

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.

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
1) Change	P	MARIO AGUIRIANO	1540 NE 173 ST
Add			MIAMI, FL. 33162
XX Remove	P	ELSY MARLENY AGUIRIANO Ma	820 NE 141 ST
2) Change XX Add	<u>-</u>	LEST MARLENT AGGINATION	MIAMI, FL. 33161
Remove 3) Change	VP	ALBA NOHELIA MONTALVAN F	175 50 NE 6 AVE
XX Add			MIAMI, FL. 33162
Remove			
4) Change			
Add			
Remove 5) Change			
Add			
Remove			
6) Change			<u>,</u> ,
Add			
Remove			

E Hame-dian	adding additional Art	ticles, enter chai	nge(s) here: .			
(Attach additiona	I sheets, if necessary).	(Be specific)				
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F. If an amendmen	nt provides for an exc	hange, rectassin	contained in th	e a <u>mendment it</u>	self:	
(if not appli	implementing the amicable, indicate N/A)	·				
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	DECEMBER 1, 2020 , if other than the
The date of each amendment(s) ad date this document was signed.	DECEMBER 1, 2020 , if other than the option:
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blooding the Department's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
must be separately provided for e	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
12/01/2020 Dated	<u> </u>
Signature Man	ector, president or other officer - if directors or officers have not been
selected	ector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)
;	MARIO AGUIRIANO
-	(Typed or printed name of person signing)
1	
-	(Title of person signing)