P15000072131

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DARRELL'S R AND R VENDING INC.

DOCUMENT NUMBER: P15000072131

The enclosed Articles of Amendment and fee are submitted for filling.

Please return all correspondence concerning this matter to the following:

DARRELL PRIETO		
Name of Contact Person		
DARRELL'S RANDR VENDING INC		
Firm/ Company		
1924 AMALFICT		
Address		
ST. AUGUSTINE, FL 32092		
City/State and Zip Code		

DARRELL PRIETO. DP @ 9MAIL. COM
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

DAMARIS PRIETO	at (954) 268-0459
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

☐\$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)

Malling 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 Articles of Incorporation



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

(Document Number of Corporation (if known)

R. A. Prietos Enterprises Inc. The new mast 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 to word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicables (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address if applicables (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent New Registered Agent New Registered Office Address (City) Florida (Zip Code)	A. <u>IT amending name, enter the new name</u>	or the corporation;		
"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 applicables. (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailling address if applicables. (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 New Registered Office Address: Florida Florida	R.A. Prietos	Enterprises	INC	The new
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 New Registered Office Address. Florida Florida	"Corp.," "Inc.," or Co.," or the designation	on "Corp," "Inc," or "Co".	A professional corporation	
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 (Florida street address) New Registered Office Address: Florida			N	
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 (Florida street address) New Registered Office Address: Florida			H	
Name of New Registered Agent (Florida street address) New Registered Office Address: Plorida Street Address: New Registered Office Address:			7	
Name of New Registered Agent (Florida street address) New Registered Office Address: Plorida Street Address: New Registered Office Address:			A	
New Registered Office Address:, Florida			in Florida, enter the name o	f the
New Registered Office Address:, Florida	Name of New Registered Agent	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
		(Florida street ad	F }	·
	New Registered Office Address:	(City)		

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

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:

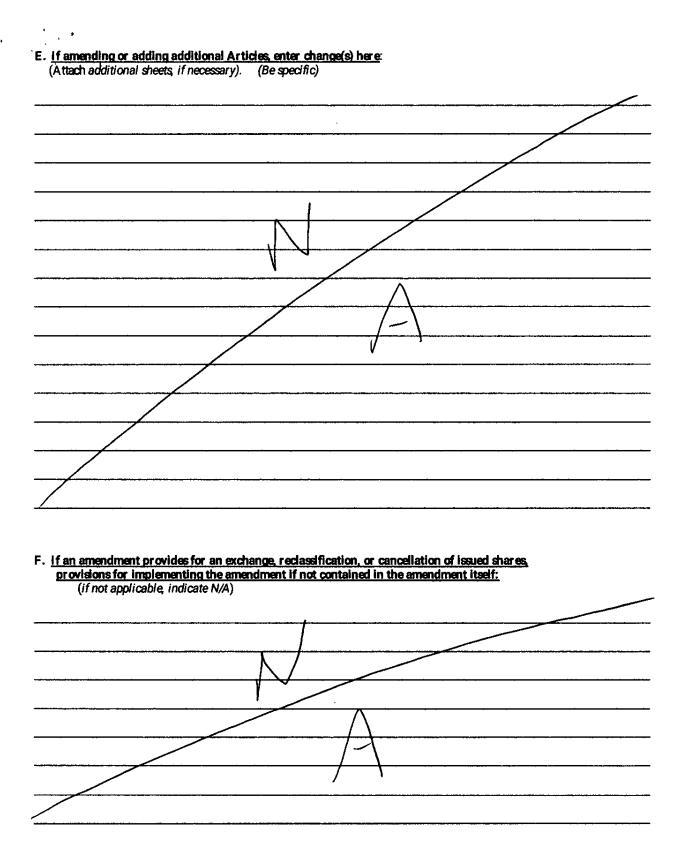
(Attach additional sheets, if necessary)

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.

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>	Add	ress /
1) Change				
Add				
Remove			7	
2) Change			/_	
Add			/ _	
Remove			/ _	
3) Change				
Add			/	
Remove			<u></u>	
4) Change		- —		
Add				
Remove				
5) Change		_ /	Company of the State of the Sta	
Add				
Remove			**index-related to	
6) Change	/			
Add				
Remove				



The date of each amendment(s) adoption:date this document was signed.	NA	, if other than the
Effective date if applicable:	(no more than 90 days after amendr	ment file date)
Note: If the date inserted in this block does no document's effective date on the Department of S		g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHE	ECK ONE)	
The amendment(s) was/were adopted by the siby the shareholders was/were sufficient for ap	hareholders. The number of votes ca oproval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting of		
"The number of votes cast for the amend	dment(s) was/were sufficient for appr	oval
by(vati	ng group)	
The amendment(s) was/were adopted by the b action was not required.		r action and shareholder
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators without shareholder acti	ion and shareholder
Dated 4 10	3/16 Outl	
(By a director, presid	dent or other officer – if directors or o rporator – if in the hands of a receiver by that fiduciary)	
	DARRELL PRI Typed or printed name of person sign	
	President	** Pg/
	(Title of person signing)	