## P150000 19219

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: SENOR TEQUILA AT WESTCHASE INC DOCUMENT NUMBER: P15000079219 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANA E ROSARIO Name of Contact Person AMERICAN TAX & PAYROLL SERVICES LLC Firm/ Company **887 STATE ROAD 436** Address CASSELBERRY, FL 32707 City/ State and Zip Code PAYROLL@AMERICANTAXPAYROLL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407 ) 767-1647

Area Code & Daytime Telephone Number ANA E ROSARIO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SENOR TEQUILA AT WESTCHASE INC		
(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)
P15000079219		
(Document Number	er of Corporation (if know	1)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his <i>Florida Profit Corpord</i>	ation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>*</u>	
N/A		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corpora	rated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	co 2
		SE 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P29
	N/A	
		the name of the
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addi-		the name of the
Name of New Registered Agent N/A	<del></del>	
(Florida	a street address)	
New Registered Office Address:	- <u></u>	, Florida
	(City)	(Zip Code)
No. Donishood Assessed Company of the second Donishood Assessed		
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		igations of the position.
, , , , , , , , , , , , , , , , , , , ,	•	
<del></del>		
Signature of Ne	w Registered Agent, if chai	nging

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	S		CLAUDIA ESPARZA	258 WOODED VINE DR
X Add				WINTER SPRINGS , FL 32708
Remove				
2) Change		_		
Add				- The second sec
Remove Change		<del></del>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
, Add				
Remove				

E. If amendia (Attach add	n <mark>g or adding addit</mark> ditional sheets, if ne	ional Articles, e cessary). (Be	nter change(s) h specific)	<u>ere</u> :		
N/A		<del>-</del>	<del></del>			
	<del></del>					
				<u> </u>		
<del></del>						
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	<u> </u>			, ,		
	<u> </u>					
F. If an amer provision (if no	ndment provides for implementing t applicable, indica	or an exchange, the amendmente N/A)	reclassification, nt if not contains	or cancellation of the contract of the contrac	of issued shares, nent itself:	
N/A						
					·	
		<u>-</u> .				

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	adoption:	, if other than
date this document was signed.		
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	)
must be separately provided fo	oproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
09/17/202 Dated Signature	The state of the s	
(By,ar select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other countries fiduciary by that fiduciary)	
	ALVARO MELLADO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>