## P16000010469

(Re	questor's Name)	
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Certified Copies	Certificates	s of Status
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S. TALLENT OCT 04 2016 SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED :

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LOS GENERALE	S TACOS Y MAS, INC.	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	JAINE GUISADO		
•		Name of Contact Person	1
	LOS GENERALE TACOS Y	MAS, INC.	
•		Firm/ Company	
	10520 NW 34th AVE		
•		Address	
	MIAMI, FL 33147		
•		City/ State and Zip Code	e /
SAST	'AXSERVICES@GMAIL.CO	DM .	
<del></del>	<del>-</del>	sed for future annual report	notification)
	·	·	,
For further information	n concerning this matter, pleas	se call:	
JAINE GUISADO			
		at (	) de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made [	payable to the Florida Depa	urtment 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 Divis P.O.	ling Address undment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LOS	<b>GENERA</b>	LES T	ACOS	Y	MAS,	INC.
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(Name	of Cornoration as currentl	y filed with the Florida De	nt. of State)		<u> </u>
P16000010469		, med with the Fierida Be	pri di Brate)		
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation	adopts the following ame	ndmen	ıt(s) to
A. If amending name, enter the new n	ame of the corporation:				
			The	new	
name must be distinguishable and con "Corp.," "Inc.," or Co., ' or the design word "chartered," "professional associa	nation "Corp. ' "Inc." or "	Co'. A professional corpo			
B. Enter new principal office address, (Principal office address MUST BE A S		N/V			
	,		TAS:	<del>-</del> 5	
			<u> </u>	S	
C. Enter new mailing address, if appl		/ ^	ASS	27	<del></del>
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	<u> </u>			IT
			FES E	<u>₹</u>  9	Ų
				_र्रो ::	
D. If amending the registered agent an new registered agent and/or the ne			ime of the	**	
Name of New Registered Agent	JAINE GUISADO				
	10520 NW 34th AVE				
	(Florida str	eet address)			
New Registered Office Address:	MIAMI,		Florida 33147		
		(City)	(Zip Code)		
New Registered Agent's Signature, if c	hanging Registered Agent:				
I hereby accept the appointment as regis	tered april. I am familiar v	vith and accept the obligatio	ns of the position.		
X					
	Signature of New R	egistered 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 <math>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>	Name	<u>Addres</u> s
1) Change	PT	ANGELICA M. ALFARO	10520 NW 34th AVE
Add			MIAMI, FL 33147
X Remove			
2) X Change	PT	JAINE GUISADO	10520 NW 34th AVE
Add			MIAMI, FL 33147
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			480-
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/K	
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)	
N/A	

The date of each amendment(s) addate this document was signed.	loption:, if other than t
09/2	1/2016
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(No more visito y visito amenanti m gne unit)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as t partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
09/21/2016 Dated	
Signature 📉 🤇	Ingelia Malfoso
	rector, president or other officer —/if directors or officers have not been  I, by an incorporator — if in the hands of a receiver, trustee, or other court
	ed fiduciary by that fiduciary)
	ANGELICA M. ALFARO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)