P12000015897

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SECRETARY OF STATE
INLLAHASSEF FI ORIO

MAR 1 6 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AELLA AND CARTERING
P16000015897 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
OSCAR MENDEZ	
MENDEZ PAELLA A	Name of Contact Person ND CARTERING
5801 NW 2 ST	Firm/ Company
MIAMI, FL 33126	Address
	City/ State and Zip Code
oscarm1951@yahoo.com	n
E-mail add	lress: (to be used for future annual report notification)
For further information concerning this matter	, please call:
Oscar Mendez	786 277-7514 at ()
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 Fe Certificate of Sta	
Mailing 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 to Articles of Incorporation of

Name of Corporation as currently filed with the P16000015897	ie Florida Dept./0	of State)			
(Document Number of Corporation	n (if known)		,		
Parsuant to the provisions of section 607,1006, Florida Statutes, Incorporation:	this <i>corporation</i> 'a	adopts the following	ng amendment(s) to its At	rticles of
A. If amending name, enter the new name of the corporation: MENDEZ PAELLA AND CATERING COPP	Ncm	f		2016 Ha	ga ya Pen
name must be distinguishable and contain the word "corpore Corp.," "he.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviation	a "Co". A profe		on name must \hat{y}	ประจำสัญ เพิ่มเล่าการ	7 I
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			i i	EL OBIDA	יי די
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 a new registered agent and/or the new registered office address.		i, enter the name	of the		
Name of New Registered Agent	N12				
(Florid	la street address)				
New Registered Office Address: (C	City)	Florida	(Zip Code)		
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered usent. I am famili	ar with and accep		of the position.		

Wannending 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: XChange	<u>PT</u>	John Do	<u>e</u>	÷	٠.			
X Remove	$\underline{\mathbf{V}}$	Mike Jos	nes	•	•			
_X Add	<u>sv</u>	Sally Sm	<u>nith</u>		*			•
Type of Action (Check One)	Title		Name			<u>Addres</u> s		
1) Change		_				 		
Add								
Remove								
2) Change								
Add								
Remove							····	
3) Change					_			
Add						·		
Remove								
4) Change		_			-v			
Add								
Remove								
5) Change		_						
Add								
Remove								
6) Change		_						

_ Add

_ Remove

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)		(Attach additional sheets, if necessary).	les, enter change(s) here:
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(if not applicable, indicate N/A)	_		
		If an amendment provides for an exchan	ige, reclassification, or cancellation of issued shares,
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		provisions for implementing the amendi	nge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:

	n:	, if other than the search is
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	e general
■ The amendment(s) was/were adopted by by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement 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 adopted by action was not required.	y the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder	
03/08/2016 Dated	, (
Signature		
(By a director selected, by a	, president or other officer – if directors or officers have not been n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
OSC	AR MENDEZ	
	(Typed or printed name of person signing)	<u> </u>
PRES	SIDENT	
	(Title of person signing)	