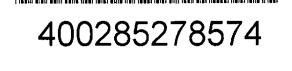
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Special Instructions to I	Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DRUMS BAR & I	FOOD, INC	
DOCUMENT NUMI	D14000010000		****
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	JANETH ZABALA		
		Name of Contact Perso	n
	MPE CONSULTING, CORI	)	
		Firm/ Company	
	2700 GLADES CIRCLE ST	E 127	
		Address	
	WESTON, FL 33327		
		City/ State and Zip Cod	e
izahal	a@mpeconsulting.net		
		sed for future annual report	notification)
		ou tot ratare amaar report	nomenton,
For further information	n concerning this matter, pleas	se call:	
JANETH ZABALA		at (	6812903
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	artment 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 Divi P.O.	ling Address Indment Section Indicate the section of Corporations Indicate the section of Section o	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle
			El 22201

## Articles of Amendment to Articles of Incorporation of

DRUMS BAR & FOOD INC.

DRUMS BAR & FOOD, INC		
(Name of Corporation	n as currently filed with the Florida Dept. of State)	
(Documen	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment	nent(s) to
A. If amending name, enter the new name of the corp	poration:	
	The ne "corporation," "company," or "incorporated" or the abbreviatio "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."	on
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	(ESS)	
		= = =
C. Enter new mailing address, if applicable:	3.55	5 Fm
(Mailing address MAY BE A POST OFFICE BOX)		2 0
	11 (c)	1-3
	<u> </u>	-
		-
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		
Name of New Registered Agent		
	(Florida street address)	
No Postano IOM AII	EL 1	
New Registered Office Address:	, Florida (Zip Code)	-
New Registered Agent's Signature, if changing Regist		
I hereby accept the appointment as registered agent. I a	am familiar with and accept the obligations of the position.	
Signate	ture 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.

Example: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	DRUMS BAR & FOOD, C.A	AVENIDA JESUS SUBERO
Add			CC SAN REMO MALL LOCAL 4
X Remove			EL TIGRE - ANZOATGUI
2) Change	P	ROBERTO GIL	10700 NW 66 ST 104
X Add			DORAL,FL 33178
Remove			AND GLOWING THE STATE OF THE ST
3 ) Change	VP 	INTERNATIONAL DEFLUIDOS,C.	AVE 61 CALLE 114A-114B
Add			No. 114A-68
X Remove			MARACAIBO-ZULIA (VEN)
4) Change	VP	YRAM ROMAY	10700 NW 66ST 104
XAdd			DORAL, FL 33178
Remove			
5) Change			
Add			
Remove			
6) Change			
_			
Add			
Remove			

Attach addition	adding additional Articles, val sheets, if necessary). (Be	enter change(s) her e specific)	<u>'e</u> :		
			,		
	<del>-</del> · · · ·				
			·		
	····				
	<b></b>				
f an amendm	ent provides for an exchange	e. reclassification. o	r cancellation of issue	ed shares.	
<u>provisions fo</u>	implementing the amendm	ent if not contained	in the amendment its	self:	
(if not ap	olicable, indicate N/A)				
					-
<del> </del>					

	03/01/2016	
The date of each amendment date this document was signed	(s) adoption:	_, if other than the
Effective data if applicable	03/01/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this date will to Department of State's records.	iot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement ad for 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)	
	(voting group)	
The amendment(s) was/wer action was not required.	. re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	•
03/02	/2016	
Dated Signature		
(B	y a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	-
	ROBERTO GIL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	