## P16000023134

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SECHETARY OF STAFE STAFE OF CORPORATIONS OF CORPORATIONS

OCT - 3 2016

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: TACO BUS 01 INC							
DOCUMENT NUMBER: P16000023134							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
NAYMI LABRADA							
Name of Contact Person							
Firm/ Company							
2320 E FLETCHER AVE							
Address							
TAMPA FL 33647							
City/ State and Zip Code							
HARSHA.TAS@GMAIL.COM							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
NAYMI LABRADA at (786 ) 491-2441							
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 Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)							

Street Address

Clifton Building

Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

TACO BUS 01 INC

## (Name of Corporation as currently filed with the Florida Dept. of State)

P16000023134	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuts Articles o. Incorporation:	ates, this Florida Profit Corporation adopts the following amendments
A. If amending name, enter the new name of the corpora	ution:
	· · · · · · · · · · · · · · · · · · ·
name must be distinguishable and contain the word "con "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," word "chartered," "professional association," or the abbrev	The new proporation," "company," or "incorporated" or the abbreviation is, or "Co". A professional corporation name must contain the viation "P.A."
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>(</u> )
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered off	
new registered agent and/or the new registered office	address:
Name of New Registered Agent	
(FI	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered	d Agent
hereby accept the appointment as registered agent. I am fa	amiliar with and accept the obligations of the position.
G:	CH Day I A see I

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 De	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	<u>ones</u>			
<u>X</u> Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title		Name	Address		
1) Change	P	_	NAYMI LABRADA	18333 BROOKPARK DR		
Add				ТАМРА		
Remove						
2) Change	<u>P</u>		USMAN BHATTI	16405 ENCLAVE VILLAGE DR		
Add				TAMPA		
Remove				FL 33647		
3) Change		_				
Add		1				
Remove						
4) Change		_				
Add						
Rer-ove						
5) Change	<del></del>	_				
Add						
Remove						
6) Change		_	<del></del>			
Add						
Remove						

amending or adding additional Arti attach additional sheets, if necessary).		
<del></del>		
an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
<del></del>		

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	•
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amenument(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  Dated  Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  NAYMI LABRADA	 `
(Typed or printed name of person signing)	
(Title of person signing)	