P160000023939

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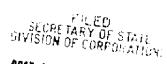
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Mina	's Bistro, Inc			
DOCUMENT NUMBER: P1600002	3939			
The enclosed Articles of Amendment	and fee are submitted for fili	ng.		
Please return all correspondence conce	erning this matter to the follo	wing:		
	Jose Andres	Benavides		
	Name of Co	ontact Person	-	
	Minas Bistro	, Inc.		
	Firm/ C	Company		
	4391 Colonial B	lvd Suite 104	ļ	
	Ad	dress		
	FT. Myers, Flo	orida 33966		
	City/ State	and Zip Code		
	Minasbistro@	live.com		
E-mail add	lress: (to be used for future a	nnual report	notification)	
For further information concerning this	s matter, please call:			
Jose Andres Benavides	at (239	225-1139	
Name of Contact Perso		Area Coc	le & Daytime Telephone Number	
Enclosed is a check for the following a	amount made payable to the	Florida Depa	rtment of State:	
■ \$35 Filing Fee □\$43.75 F Certificat	Filing Fee & S43.75 File te of Status Certified (Additional enclosed)	Copy Loopy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	tions	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2017 APR -3 PM 1:25

Mina's Bistro, Inc.

(Name of Corporat	ion as currently	filed with the Florida Dept. of State)	.
	P1600002393	9	
(Docur	ment Number of C	'orporation (1f known)	
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation.	la Statutes, this <i>Fl</i>	orida Profit Corporation adopts the folk	owing amendment(s
A. If amending name, enter the new name of the c	orporation:		
	Minas Bistro, l	nc	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co " or the designation "Corp word "chartered." "professional association," or the	o ." "In $\hat{\epsilon}$," or "Co	" A professional corporation name n	te abbreviation
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET AD</u>			
			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u>)X</u>)		
D. If amending the registered agent and/or registe	rad affice address	c in Clavida, autoretha nama of the	
new registered agent and/or the new registered		s in Fforida, enter the name of the	
Name of New Registered Agent			
	(Florida street	address)	
New Registered Office Address:		, Florida	
	(C	ityi (Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent.		h and accept the obligations of the positi	on.
Sign	nature of New Reg	istered 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		-		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add			-	
Remove				
5) Change				
Add		_		
Remove				
Kellove				
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)		
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(if not applicable, indicate N/A)	provisions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	
		· · · · · · · · · · · · · · · · · · ·
		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	03/30/2017	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, a Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amend e sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following s 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 action was not required.	adopted by the board of directors without shareholder action and shareholder action act	eholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sharehol	der
03/30/2 Dated		
Signature		
sele	a director, president or other officer – if directors or officers have not ected, by an incorporator – if in the hands of a receiver, trustee, or other orinted fiduciary by that fiduciary)	
	Jose Andres Benavides	
	(Typed or printed name of person signing)	
	President Julius Valuando F	
	(Title of person signing)	