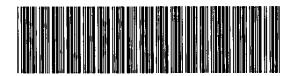
## P16000026430

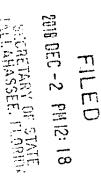
(Requ	estor's Name)	
(Addre	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	#)
PICK-UP	WAIT .	MAIL
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(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



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Christing 18th

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: JLM BURGERS	INC		
DOCUMENT NUMBER: P16000026430			
The enclosed Articles of Amendment and fee are s	ubmitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
JESUS ALBERTO DAZA			
<del></del>	Name of Contact Persor	l	
	Firm/ Company		
8080 NW 108 PLACE			
DORAL FLORIDA 33178	Address		
	City/ State and Zip Code	2	
ALCOBA@MIAMIPATENTS.C	ОМ		
E-mail address: (to be u	used for future annual report	notification)	
For further information concerning this matter, plea	ase call:		
RUBEN ALCOBA	at ( <u>305</u>	362-8118	
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made	e payable to the Florida Depa	rtment 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)	
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

JLM BURGERS INC	,
(Name of Corporation	as currently filed with the Fiorida Dept. of State)
P16000026430	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	natutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE</u>	ESSS)
	温度の
	1220 N T
C. Enter new mailing address, if applicable:	E P P P P P P P P P P P P P P P P P P P
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	and the second s
	<b>6</b>
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)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent: um familiar with and accept the obligations of the position.
Signatu	ire 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_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	Р		ALBERTO J DAZA	8080 NW 108 PLACE
Add		<del></del>	-	DORAL FL 33178
X Remove				
2) Change	Р		JESUS ALBERTO DAZA	8080 NW 108 PLACE
X Add				DORAL FL 33178
Remove				
3) Change				
Add				
Remove				<del></del>
4) Change		<del></del>		
Add				
Remove				
5) Change				
Add		<del></del> -		
Remove				
IVEIHOAE				<del></del>
6) Change		_		
Add				<del></del>
Remove				

If amending or adding additional sheets, if	ditional Articles, ente inecessary). (Be spec	r change(s) here: cific)			
	•			. <u></u>	
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				<del> </del>	
If an amendment provided provisions for implement	ting the amendment i	classification, or ca f not contained in t	ncellation of issue he amendment its	d shares, elf:	
(if not applicable, ind	icate N/A)				
			· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·			

The date of each amendmen date this document was signed		, if other than the
•	11/30/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this d he Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendmente ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
action was not required.  The amendment(s) was/we action was not required.  11/30 Dated  Signature	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder 0-/2016  By a director, president of other officer – if directors or officers have not been	
S	elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	JESUS ALBERTO DAZA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	