P16000 29318

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: LA BODEGUITA	Y MAS CORP				
DOCUMENT NUMI	BER: P16000029318					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	KATIA CEPENA					
	Name of Contact Person					
	KC N ASSOCIATES INC					
	Firm/ Company					
	11455 SW 40TH ST , #211					
	Address					
	MIAMI, FL 33165					
		City/ State and Zip Code	e			
KCN	ASSOCIATES@AOL.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
KATIA CEPENA		at (769=9832			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check for	or 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)			

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of



LA BODEGUITA Y MAS CORP

(Name of	of Corporation as currently	filed with the Florida Der	or organization 31 D 3- 20
P16000029318	n Corporation as currently	med with the Florida Del	• •
	(D	Companies (if Images)	SECRETARY DE STATE TALLAHASSEE, FLORIDA
	(Document Number of	Corporation (II known)	MELANASSEE, FLORIDA
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation :	adopts the following amendment(s) t
A. If amending name, enter the new na	ime of the corporation:		
-			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corpo	porated" or the abbreviation
B. Enter new principal office address,		2525 SW 8TH ST	
(Principal office address MUST BE A S		MIAMI, FL 33135	
C. Enter new mailing address, if appli		2525 SW 8TH ST	
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33135	<u> </u>
			<u> </u>
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the na	ame of the
Name of New Registered Agent	KC N ASSOCIATES INC		
rune of the registered riges.	11455 SW 40TH ST #211		
	(Florida stre	et address)	
New Registered Office Address:	MIAMI		. Florida 33165
<u>New Registerea Office Address</u> .	(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent:	ith and accept the obligation	one of the position
t hereby accept the appointment as regis.	dered agem. Tam Jamaian w	—	ть од те розист.
	Signature of New Re	vistered Avent, 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 Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	FRIDA E VARGAS CAMPI	2525 SW 8TH ST
Add			MIAMI, FL 33135
X Remove			
2) Change	Р	KEIMY GIL	2525 SW 8TH ST
X Add			MIAMI, FL 33135
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
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5) Change			
A dd			
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6) Characa			
6) Change			 -
Add			<u></u>
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
·	
	
-	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

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 document's effective date on the I	block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendme sufficient for approval.	nt(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	zment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Signature (By a	director, president or other officer – if directors or officers have not be	
	ted, by an incorporator $-$ if in the hands of a receiver, trustee, or other einted fiduciary by that fiduciary)	ourt
	KEIMY GIL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	