P160000034404

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SUCRETARY OF SUC

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LA VASCA DELIG	CATESSEN INC	
DOCUMENT NUME	BER: P16000034404		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	LILIANA BOSCH		
		Name of Contact Person	1
		Firm/ Company	
		Address	
	22861 SW 114TH PATH		
		City/ State and Zip Code	:
	MIAMI, FL 33170		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
LILIANA BOSCH		786 at (473-4724 le & Daytime Telephone Number
Name (of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made j	payable to the Florida Depa	ortment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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 endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 4. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILE	
2022 MAR 11 PM	0
SECRETAL PHIZ).
State) //: 50 05	78

LA VASCA DELICATESSEN INC

(Name of Corporation a	as currently filed with the Florida Dept. of State $V/U_{SC} = 0$
P16000034404	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpo	oration:
	The
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered officers.	
Name of New Registered Agent	<u> </u>
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	
	es of Nove Rougestored Ament, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	o <u>nes</u>	
_X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change	AMBR	<u>. </u>	MATIAS TORRES	3407 SW 8TH STREET
Add				MIAMI, FL 33135
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	,
	
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	,
. 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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· •	02/10/2022	
The date of each date this documen	amendment(s) adoption:nt was signed.	, if other than the
Effective date if:	applicable:	
	(no more than 90 days after amendment file date)	
	inserted in this block does not meet the applicable statutory filing requirements, this date will notive date on the Department of State's records.	ot be listed as the
Adoption of Ame	endment(s) (<u>CHECK ONE</u>)	
The amendment action was not	nt(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharequired.	areholder
	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval.	
	nt(s) was/were approved by the shareholders through voting groups. The following statement rately provided for each voting group entitled to vote separately on the amendment(s):	
"The nur	mber of votes cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	03/04/2022	
	Dated	
	Signature MY	
	(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)	
	MATIAS PINZON	
	(Typed or printed name of person signing)	
	MATIAS PINZON	
	(Title of person signing)	