P16000085970

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	: #)
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JUL 21 2017 C MICHAIR

COVER LETTER

		<u>COVER LETTER</u>		BH JUL 17 PH L: 09
TO: Amendment Secti Division of Corpo				THE COURT
NAME OF CORPOR	DELICIAS DEL I	PRADO CORP		24
DOCUMENT NUMB	P16000085970 ER:			*.0
The enclosed Articley o	of Amendment and fee are st	ibmitted for filing.		
Please return all corres	pondence concerning this ma	atter to the following:		
	JOSE F MARQUEZ	,		
-		Name of Contact Person	n	
-	16111 SW 136TH WAY	Firm/ Company		
-	MIAMI FLORIDA 33196	Address		
-		City/ State and Zip Cod	e	
JACP:	2002@GMAIL.COM			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
JOSE F MARQUEZ		305	8045151	
Name o	f Contact Person	at (Area Co	de & Daytime Telephone Number	_
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)	
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section in of Corporations Building necutive Center Circle issee, FL 32301	

Articles of Amendment Articles of Incorporation

DELICIAS DEL PRADO CORP

(<u>Name</u> -	<u>of Corporation as curren</u>	<u>ifly filed with the Florida D</u>	ept, of State)
P16000085970			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following amendme
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc." or Co.," or the design word "chartered," "professional associa	ration "Corp " "Inc." or	"Co" A professional corp	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		8398 NW 70 STREET	
		DORAL FLORIDA 33	166
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		16111 SW 136TH WAY	,
	,	MIAMI FLORIDA 331	96
D. If amending the registered agent at new registered agent and/or the ne			name of the
Name of New Registered Agent	JESUS COBOS		
odije oj ives registereti Ageni	7655 SW 153 CT		
	(Horda)	street address)	
New Registered Office Address:	MIAMI		33193 , Florida
		(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.

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. It an officerlidirector 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 Doe	
X Remove	<u>V'</u>	Mike Jones	
<u>X</u> Add	<u>8V</u>	Saily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
	VΡ	RAONEL LOPEZ	14229 SW 91 STREET
1) Change			MIAMI FLORIDA 33185
Add X Remove			
2) Change			
Add			
Remove			••
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
iccinove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) adoption: 07 11 2017
date this document was signed.
Effective date <u>if applicable</u> : OT 1 207 (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 not be listed as the document's effective date on the Department of State's records.
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 amendment(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 east 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 07/11/17
Signature
(By a difector, 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 (iduciary by that (iduciary)
Jose F. Marguez
(Typed or printed name of person signing)
- Resident
(Title of person signing)