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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SISTER ZAIDA'S	AFL, INC		
DOCUMENT NUMI	BER: P17000004197			
	of Amendment and fee are su	ubmitted for filing.		
Please return all corres	spondence concerning this ma	atter to the following:		
	AMPARO ARMAS			
Name of Contact Person				
	SISTER ZAIDA'S AFL, INC			
		Firm/ Company		
	17783 SW 145 AV			
		Address		
	MIAMI, FL 33177			
		City/ State and Zip Code	2	
AMPA	ARO7ARMAS@AOL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
AMPARO ARMAS		at (7863575296)		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	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		Street Address Amendment Section		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O.	Box 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SISTER ZAIDA'S AFL. INC.

SISTER ZAIDAS AI E, INC	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P17000004197	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	tion:
SISTER ZAIDA'S ALF, INC	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office a	
new registered agent and/or the new registered office a	auuress:
Name of New Registered Agent	
	
(F)	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Signature of	f 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	PΤ	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	_Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	_	_	
Add			
Remove			
5) Change			
Add		1	
Remove			
6) Change		-	
Add			
Remove			

	(Be specific)				
					
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		<u> </u>			
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		 .			
f an amendment provides for an excha	nge, reclassificat	ion, or cancellation	n of issued shar	es,	
f an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassificat dment if not cont	ion, or cancellation ained in the amer	n of issued shar dment itself:	es,	
provisions for implementing the amen	inge, reclassificat dment if not cont	ion, or cancellation ained in the amer	n of issued shar dment itself:	<u>es,</u>	
provisions for implementing the amen	unge, reclassificat dment if not cont	ion, or cancellation ained in the amer	on of issued shar dment itself:	<u>es,</u>	
provisions for implementing the amen	inge, reclassificat dment if not cont	ion, or cancellation ained in the amer	on of issued shar dment itself:	<u>es,</u>	
provisions for implementing the amen	ange, reclassificat dment if not cont	ion, or cancellation ained in the amer	on of issued shar dment itself:	es,	
provisions for implementing the amen	ange, reclassificat dment if not cont	ion, or cancellation ained in the amer	on of issued shar	es,	
provisions for implementing the amen	ange, reclassificat dment if not cont	ion, or cancellation ained in the amer	on of issued shar	es,	
f an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassificat	ion, or cancellation ained in the amer	on of issued shar	es,	

The data of each amondments	3/8/17) adoption:	_, if other than the
date this document was signed.) adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	l not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast 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	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
3/8/17 Dated Signature		
(By a selec	director, president or other officer – if directors or officers have not been etcd, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
	AMPARO ARMAS	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)