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	From: Account Name : DDS TAMPA TAX SERVICE Account Number : 120140000115 Phone : (813)882-8426 Fax Number : (813)884-0263
	**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:
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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DE SOUZA LOPES, ALESSANDRA F

. . . . . .

Name of Contact Person

TACO LOCO FRESH FOODS INC.

Firm/ Company

6932 HAWTHORNE TRACE LANE

Address

RIVERVIEW, FL 33578

City/ State and Zip Code i

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DE SOUZA LOPES,	ALESSANDRA F	813 at (	476-0807
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address ndment Section Sion of Corporations Box 6327 shussee, FL 32314	Amene Divisie Clifton 2661 E	<u>A'ddress</u> Injust Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendmentto Articles of Incorporation of

#### TACO LOCO FRESH FOODS INC.

## (Name of Corporation as currently filed with the Florida Dept. of State)

P17000010451

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(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

### A. If amending name, enter the new name of the corporation:

	<u> </u>	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered." "professional association," or the	" "Inc," or "Co". A professu	or incorporated or the abbreviation on and corporation name must contain the
nora charcica, propositina associatin, ar me	Domevation 1.A.	
B. Enter new principal office address, if applicable	:	51 S m
(Principal office address <u>MUST BE A STREET ADD</u>		528 M
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE, BO)	¥.	
(muning duaress <u>mAT BE A POST OFFICE, DO</u>	<u></u>	
	·····	
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D. If amending the registered agent and/or register	ed office address in Florida, er	iter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address;		
	tCay	(Zip Code)
New Degistered Accestly Steenance (Action 1) Do	· · · ·	
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.	Istered Agent:	

Signature of New Registered Agent, if changing

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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 Due 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, 1'T as a Change, Mike Jones, V as Remove, and Sully Smith, SV as an Add.

Exe	amp	le:
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<u>X</u> Change	<u>91</u>	John Doe	
<u>X</u> Remove	<u>v</u> <u>i</u>	Mike Jones	
<u>X</u> Add	<u>sv</u> :	Sally Smith	
Type of Action (Check One)	Title	Name	Address
I) Change	VP	LOPES, MARCELO F.	6932 HAWTHORNE TRACE LN
X^dd			RIVERVIEW, FL 33578
Remove			
2) Change			
Add			
Remove			
3) Change	· <del></del>		
^dd		1	
Remove			
4) Change			
Add			
Remove			·
5) Change			
bbA			
Remove			
6) Change			
Add		·	
Remove			

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Attach additional sheets, if necessary),	(Be specific)
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# F. 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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The date of each amendment(s) adoptic date this document was signed.	n:	, if other than the
Effective date if applicable:		
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block of document's effective date on the Departm	does not meet the applicable statutory ont of State's records.	Filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted l by the shareholders was/were sufficient	by the shareholders. The number of ve at for approval.	otes cast for the amendment(s)
The amondment(s) was/were approved must be separately provided for each	by the shareholders through voting gr voting group entitled to vote separatel	roups. The following statement by on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient fo	ութենչով
by		
, — , <u> </u>	(voting group)	
The amondmont(s) was/were adopted t action was not required.	by the board of directors without share	holder action and shareholder
The amendment(s) was/were adopted t action was not required.	by the incorporators without sharehold	er action and shareholder
08/28/2018		
Signature	provident or other officer - if directo	
spected, by a	in incorporator — if in the hands of a re- aciary by that fiduciary)	regiver, trustee, or other court
DE S	OUZA LOPES, ALESSANDRA F	
<u> </u>	(Typed or printed name of person	n[signing]
PSTL	)	
	(Title of person signi	ing)
		:

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