P17000015093

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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: RINCONCITO LA	ATINO SPORTS BAR INC			
DOCUMENT NUM	P17000015002				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
·	MARIA E RUIZ				
	Name of Contact Person				
	L & M ACCOUNTING SERVICES INC				
	Firm/ Company				
	7750 SW 117TH AVE SUITE 201D				
Address					
	MIAMI FLORIDA 33183				
		City/ State and Zip Cod	e		
MAF	RIAQUIROS9@HOTMAIL.C	OM		THE 21	
		sed for future annual report	notification)	20 C	
	,	·		2	
For further information	on concerning this matter, pleas	se call:		1 1811: 43	
MARIA E RUIZ		at (595-2407		
Name	of Contact Person	Area Co	de & 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)		
Am Div	iling Address endment Section ision of Corporations D. Box 6327	Ameno Divisio	Address dment Section on of Corporations a Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RINCONCITO LATINO PORTS BAR INC

(<u>Name o</u>	of Corporation as currently filed with the Fl	orida Dept. of State)
P17000015092		
	(Document Number of Corporation (if kn	own)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Cor	poration adopts the following amendme
A. If amending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and con "Corp" "Inc.," or Co.," or the design word "chartered." "professional associa	tain the word "corporation," "company," of ation "Corp," "Inc," or "Co". A profession tion," or the abbreviation "P.A."	r "incorporated" or the abbreviation nal corporation name must contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
	4.3	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		
(maining dual ess <u>invit bb vi vost</u>	711.02 BOX)	
		** ***********************************
	d/or registered office address in Florida, en	ter the name of the
new registered agent and/or the nev	v registered office address:	
Name of New Registered Agent	ROSALINA MORENO	
	15690 SW 72 STREET	
	(Florida street address)	
New Registered Office Address:	MIAMI	. Florida 33193
New Registered Office Address	(City)	(Zip Code)
New Registered Agent's Signature, if c		
I hereby accept the appointment as regist	ered agent. I am familiar with and accept the	obligations of the position.
	ρ	
	Signature of New Registered Agent, if	
	Signature of New Registered Agent, if	

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:	., anu oui	1). 131111111, 1	or as an ma.	
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	Р		ROSALINA MORENO	15690 SW 72 STREET
Add				MIAMI, FLORIDA 33193
Remove				
2) Change		_		<u>.</u>
Add				
Remove			,	
3) Change		_	the state of the s	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				<u> </u>
Add				
Remove				
6) Change		-		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
· · · · · · · · · · · · · · · · · · ·	

	03/17/2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	3/24/2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s).	vl
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
·		
03/17/20 Dated	017	
Signature	Pol man	
(By a selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	ROSA MORENO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	Marie