

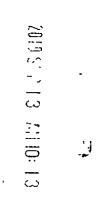
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Restaurant & Kitc	hen Solutions,	Inc	
DOCUMENT NUMBI	ER:			
The enclosed Articles o	f Amendment and fee are su	bmitted for fili	ng.	
Please return all corresp	ondence concerning this ma	tter to the follo	wing:	
1	uis Vega Barroso			
_		Name of Co	ontact Person	1
i	Restaurant & Kitchen Solution	ons, Inc		
-	 	Firm/ C	Company	-
1	2481 SW 250th Terr		ompany	
_		Ade	dress	
I	lomestead, FL 33032			
_		City/ State a	and Zip Code	2
Dt. C	da ad O a ad II a a d			
KKSOIT	niami@gmail.com			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information	concerning this matter, pleas	se call:		
Luis Vega Barroso		at (786	357-7254
Name of	Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the l	Florida Depa	rtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified (Additiona enclosed)	Сору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations			Amend Divisio	Address ment Section n of Corporations
P.O. F Tallah	Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

Restaurant & Kitchen Solutions, Inc.		2012/2012/10 1110:13
(Name o	f Corporation as curre	ntly filed with the Florida Dept. of State)
P17000025102		
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, th	tis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
N/A		#L
	ation "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
R. Enter new principal office address i	fannligable:	N/A
B. <u>Enter new principal office address, i</u> (Principal office address <u>MUST BE A ST</u>		****
C. Enter new mailing address, if applic (Mailing address MAY BE A POST C		N/A
	 	
D. If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent	N/A	
	(Florida	street address)
1′ D 10m A11	N/A	, N/A
New Registered Office Address:		(City) , Florida (Zip Code)
		(
New Registered Agent's Signature, if ch	anging Registered Age	nt:
I hereby accept the appointment as registe	red agent. I am lamilia	r with and accept the obligations of the position.
	Signature of New	v 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	<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 Sr	ան լի	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	V		Claudia V Ramirez	12481 SW 250th Terr
Add				Homestead, FL 33032
X Remove				
2) Change		_		
Add				
Келюче				
3) 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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fan :	amendment p	rovides for a	ın evchan	oe reclassifi	ication or c	ncellation (if issued sho	rac	
prov	isions for Imp	olementing th	re amendi	nent if not c	ontained in	the amendn	ent itself:		
(if not applica	ble, indicate	N/A)				· · · · ·		
									
		<u> </u>							
			-						

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(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 dat Department of State's records.	e 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.	1
	upproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	r
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	per 10. 2019	
Dated	// 5	
Signature	fran	
sele	a director, president or other officer — if directors or officers have not been cted, by an incorporator — if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Luis Vega Barroso	
	(Typed or printed name of person signing)	·
	President	
	(Title of person signing)	