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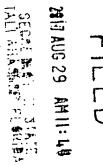
(Red	questor's Name)	_
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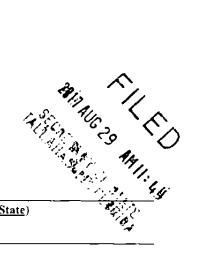
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: MOLCAJETE HID	ALGO CORP	
DOCUMENT NUMBI	ER:		
	f Amendment and fee are sul	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
i	.UIS HERNANDEZ		
-		Name of Contact Person	1
A	MOLCAJETE HIDALGO CO	ORP	
_		Firm/ Company	
3	175 PALM BEACH BLVD	· ······ Gompany	
_		Address	
I	ORT MYERS, FLORIDA 3	3916	
_		City/ State and Zip Code	:
LUI H	B@HOTMAIL.COM		
		ed for future annual report	notification)
	`	•	·
For further information	concerning this matter, pleas	e call:	
LUIS HERNANDEZ		239	de & Daytime Telephone Number
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MOLCAJETE HIDALGO CORP

(<u>Name</u>	of Corporation as current	ly filed with the Florida Dept, of State)	4/20
P17000040622			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006. Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
			The new
	nation "Corp," "Inc," or '	m," "company," or "incorporated" or the a 'Co". A professional corporation name must 'P.A."	hbreviation
B. Enter new principal office address,			·
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if appl		MOLCAJETE HIDALGO CORP	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		3175 PALM BEACH BLVD	
		FORT MYERS, FLORIDA 33916	
D. If amending the registered agent ar			
new registered agent and/or the ne		<u>i:</u>	
Name of New Registered Agent	ROSALINDA VELEZ		_
	700 MUSCOGEE DR		
	(Florida str	reet address)	_
New Registered Office Address:	NORTH FORT MYERS		
		(City) (Zip	Code)
Non Decident de la constant de la co	boost Distance A		
New Registered Agent's Signature, if continuous the Agent's Signature, if continuous the Agent's Signature, if continuous Register Agent's Signature, if continuous Register R		 with and accept the obligations of the position. 	
	Quu,	1/4	
	Signature of New I	Registered Agent, if changing	_
	5.5		

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	ROSALINDA VELEZ	700 MUSCOGEE DR
X Add			NORTH FORT MYERS
Remove			FLORIDA 33903
2) Change			
Add			
Remove			
3) Change		_ _	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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/4)	E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	THE NEW VICE PRESIDENT ADD IS ROSALINDA VELEZ
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	N/A
	-

	08/24/2017	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
	8/24/2017	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ 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):	
"The number of votes of	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 action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/24/2 Dated Signature	017	
(By sele	a director president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	LUIS HERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	