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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: El Guerrero Mexican Grill Inc.					
DOCUMENT NUMBER: P17000047751					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Isther J Helendez Name of Contact Person					
Erres of Pinellan.					
, , , , , , , , , , , , , , , , , , ,					
6447 Park Diva Ste 6					
Pinellan Park Fl 33781 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Esther J Melendez. at (727) 2897133 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
Enclosed is a check for the following amount made payable to the Florida Department of State.					
\$\frac{1}{2}\$\$ \$35\$ Filing Fee \$\frac{1}{2}\$					
Mailing Address Street Address					

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment



Articles of Incorporation 6rill (Name of Corporation as currently filed with the Florida Dept. 170000 47751 (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: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 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 office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

Signature of 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 Doc 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: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change	VP	Rosa Bernal Harban	201 5 Duncan Av
Add			Clearwater FL
X Remove			33755
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	
	

The date of each amendment(s) adoption: 08(15(2017.	, if other than the
date this document was signed.	
Effective date if applicable: 08/15/2017.	
Effective date if applicable: O8[15][20][1. (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dedocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 08/01/2017	
Signature LANENTINO ROMAN ROMAN (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other course.)	
appointed fiduciary by that fiduciary)	
Laurentino Roman Roman.	
(Typed or printed name of person signing)	
(Title of person signing)	