P1100005968

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L. LEMEUX,



COVER LETTER

TO: Amendment Section Division of Corporations

Ä

NAME OF CORPO	RATION: MINI BISTRO CO	DRP	
DOCUMENT NUM	BER: P17000059638		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ARGEL MARQUEZ		
		Name of Contact Person)
		Firm/ Company	
	9128 NW 120 ST		
	HIALEAH GARDENS	Address	
	•	City/ State and Zip Code	<u> </u>
blued	coastmia@gmail.com E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
ARGEL MARQUEZ		at (
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□S43.75 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)
Am Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

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Articles of Amendment to Articles of Incorporation of

MINI BISTRO CORP				
(<u>Name</u>	of Corporation as current	ly filed with the Florida Dep	t. of State)	
P 17000059638				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation a	dopts the follov	ving amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpor	orated" or the ation name mu	abbreviation
		1275 WEST 47 PLACE S	SUITE#406	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		HIALEAH FL 33012	HIALEAH FL 33012	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1275 WEST 47 PLACE SUITE#406		
		HIALEAH FL 33012		
				
			··	
D. If amending the registered agent an			ne of the	
new registered agent and/or the new	•	<u>s:</u>		
Name of New Registered Agent	N/A			<u></u>
	(Florida st	reet address)		
New Registered Office Address:	N/A		. Florida	
		(City)		ip Coder
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Agen tered avent. I am familiar	<u>l:</u> with and accept the obligation	us of Hot Bosit ic	
. 1 11	J. C.	, , , , , , , , , , , , , , , , , , ,	_ <u>≥</u> 3 =	P
			A A A	
		,	SSE N	
	Signature of New 1	Registered Agent, if changing		n
			SAY W	O
			۳۰ مرزوس	

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> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>v</u>	ALEJANDRO A VILLARREAL	1275 WEST 47 PLACE
X Add			SUITE#406
Remove			HIALEAH FL 33012
2) Change	S	ALEJANDRO A VILLARREAL	1275 WEST 47 PLACE
X Add			SUITE#406
Remove			HIALEAH FL 33012X
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

	ticles, enter change(s) here: (Be specific)	
N/A		
		
		
	-	
		-
 		
		
If an amendment provides for an evel	change, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

Thá duta af each amandmentic) adoption:	10 male on all const
date this document was signed.) adoption:	, if other than th
Effective date if applicable:		
	(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 will Department of State's records.	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e 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	
08/17/2		
Dated		
G.	He >	
Signature	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	
арр	ointed fiduciary by that fiduciary)	
	ARGEL MARQUEZ	
	(Typed or printed name of person signing)	.,
	PRESIDENT	
	(Title of person signing)	·····