P17000095577

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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NAME OF CORPO	RATION: GALLO DE ORO	RESTAURANT, CORP.	
DOCUMENT NUM	BER: P17000095577		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JENNY D. MARTINEZ		
		Name of Contact Perso	n
	GALLO DE ORO RESTAU	RANT, CORP.	
		Firm/ Company	
	1067 SW 27TH AVENUE		
		Address	
	MIAMI, FL 33135		
		City/ State and Zip Cod	le .
JEN?	NY4981@ICLOUD.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
JENNY D. MARTIN	EZ	786 at (856-3526 ode & Daytime Telephone Number
Name of Contact Person		Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Mailing Address Amendment Section			Address Iment Section
Division of Corporations		Divisio	on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301 IVISION OF SHIPS: 2

Articles of Amendment to Articles of Incorporation of

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GALLO DE ORO RESTAURANT, CORP.

(Name of Corporation	as currently filed with the Florida Dept. of State)		
P17000095577			
(Documen	t Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	ratutes, this Florida Profit Corporation adopts the follow	ing amendmer	nt(s)
A. If amending name, enter the new name of the corpo	oration:		
		The new	,
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"Inc," or "Co". A professional corporation name mus		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		— <u>-</u> 4 	ing Mili
		- 	
D. If amending the registered agent and/or registered		3	
new registered agent and/or the new registered off	ice address:	. بو	372
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	_ 23	
	(Florida street address)		٠,٠,٠
New Registered Office Address:	, Florida		
New Registered Office Address.		Code)	
New Registered Agent's Signature, if changing Registe	ored Agent:		
I hereby accept the appointment as registered agent. I am		,	
Signatur	re of New Registered Avent, if changing	_	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT Joh	nn Doc	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	OSWALDO J. RODRIGUEZ	1067 SW 27TH AVENUE
X Add			MIAMI, FL 33135
Remove		G CANCELLED O RETURNED CHECK	
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

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Attach additional sheets, if necessary). (Be specific)	
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares	<u>s.</u>
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

OUE TO RETURNED CHECK

JUNE 13, 2019 DUE TO RETURN.	JUNE 13, 2019	DUE TO RETURNE
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The date of each amendment(s) adoption:	, if other than t
date this document was signed.	
JUNE 13, 2019 Effective date if applicable:	
(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 date document's effective date on the Department of State's records.	will not be listed as tl
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
JUNE 13, 2019	
Dated	
Signature X	
(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 court	
appointed fiduciary by that fiduciary)	
JENNY D. MARTINEZ	
(Typed or printed name of person signing)	
PRESIDENT	
· · · · · · · · · · · · · · · · · · ·	

(Title of person signing)