

P17 000095577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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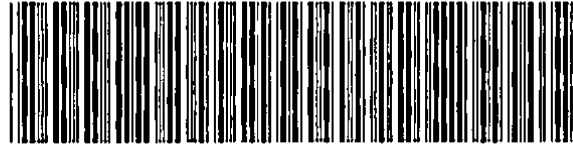
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Division of Corporations
Amendment Section

NAME OF CORPORATION: GALLO DE ORO RESTAURANT, CORP.

DOCUMENT NUMBER: P17000095577

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JENNY D. MARTINEZ

Name of Contact Person

GALLO DE ORO RESTAURANT, CORP.

Firm/ Company

1067 SW 27TH AVENUE

Address

MIAMI, FL 33135

City/ State and Zip Code

JENNY4981@ICLOUD.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JENNY D. MARTINEZ at (786) 856-3526
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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|---|---|--|--|

Mailing Address

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

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

ALLO DE ORO RESTAURANT, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

7000095577

(Document Number of Corporation (if known))

rsuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to Articles of Incorporation:

If amending name, enter the new name of the corporation:

The new 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."

Enter new principal office address, if applicable:
*Principal office address **MUST BE A STREET ADDRESS***

Enter new mailing address, if applicable:
*(Mailing address **MAY BE A POST OFFICE BOX**)*

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: _____, Florida _____
(City) (Zip Code)

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.

Signature of New Registered Agent, if changing

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (check One)	Title	Name	Address
<input type="checkbox"/> Change	<u>VP</u>	<u>OSWALDO J. RODRIGUEZ</u>	<u>1067 SW 27TH AVENUE</u>
<input checked="" type="checkbox"/> Add			<u>MIAMI, FL 33135</u>
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

DECEMBER 20, 2019

date of each amendment(s) adoption: _____, if other than the
this document was signed.

effective date if applicable: DECEMBER 20, 2019
(no more than 90 days after amendment file date)

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
ument's effective date on the Department of State's records.

option 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.

DECEMBER 20, 2019
Dated _____

Signature Jenny Martinez
(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)