P17000096147

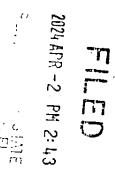
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: TIENDA MEXICA	ANA MARANATA INC	
	IBER: P17000096147		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	MICHAEL ROBINSON		
		Name of Contact Person	1
	ROBINSON ACCOUNTING	SERVICE	
		Firm/ Company	
	2335 E. BALDWIN RD.		
		Address	•
	PANAMA CITY, FL 32405		
		City/ State and Zip Code	2
	robinsonacctg@knology.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
MICHAEL ROBIN	SON	at (769-2331
Name of 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:
S35 Filing Fee	☐\$43.75 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)
Ai Di P.	ailing Address mendment Section evision of Corporations O. Box 6327 ellahassee, FL 32314	Amend Divisio The Co 2415 N	Address iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

TIENDA MEXICANA MARANATA INC



(Name of Corporati	on as currently filed with the Florida De	pt. of State)
P17000096147		EUZYAPK -2 PM 2
(Docun	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida	a Statutes this Florida Profit Corporation	adonts the following automatical
s Articles of Incorporation:	a Diatates, this I sortial I toy it corporation	adopto inc tonorning unrolling
a. If amending name, enter the new name of the co	ornoration:	
C'S DISTRIBUTION & MARANATHA INC	or por action.	
ame must be distinguishable and contain the word "co	ornarytion " "company " or "incornarytes	TheTheTheTheThe
Inc.," or Co.," or the designation "Corp," "Inc., chartered," "professional association," or the abbre	" or "Co". A professional corporation	name must contain the word
Enter new principal office address, if applicable		
Principal office address <u>MUST BE A STREET ADI</u>	DRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
). If amending the registered agent and/or register		ame 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
New Registered Office Address.	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Reg		. Pal
hereby accept the appointment as registered agent.	I am familiar with and accept the obligation	ons of the position.
Signe	ature of New Registered Agent, if changing	r
•		
Theck if applicable		

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: XChange	<u>PT</u>	John Doc	
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>	Address
1) Change		_	
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
remove			

ttach additional sheets, if nece	ssary). (Be specific,	ange(s) here:)			
-					

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				<u> </u>	
				-	
an amendment provides for	an avahanga kudlase	ification or cance	llation of iccurd c	harac	
rovisions for implementing t	he amendment if not				
(if not applicable, indicate	N/A)				
					
· · · · · ·		<u> </u>		<u> </u>	

The date of each amendment(s) a late this document was signed.	doption.	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file datc)	
Note: If the date inserted in this bocument's effective date on the Do	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and	i shareholder
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
must be separately provided for	proved by the shareholders through voting groups. The following statement 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)	
Dated_ <u>03</u> _,	28-24	
Signature		
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	SAUL FRANCISCO	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	