## P1800000 2554

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
	y/State/Zip/Phone #)	
(CR	y/State/Zip/Pfione #;	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: BOTANICA YOR	UBA IFA LAJE, INC	
	BER: P18000002554		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	NOEL TAVIO		
		Name of Contact Person	n
		Firm/ Company	
	400 PALM AVENUE		
		Address	
	HIALEAH, FLORIDA 3301	O	
		City/ State and Zip Cod	e
NTA	VIO@YAHOO.COM		
<del></del>	E-mail address; (to be us	sed for future annual report	notification)
	n concerning this matter, pleas		001.2072
NOEL TAVIO 		at (	)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□S43.75 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		Amend	Address Iment Section
	ision of Corporations . Box 6327		on of Corporations
	ahassee, FL 32314		Building Executive Center Circle
		Tallaha	issee, FL 32301

## Articles of Amendment to Articles of Incorporation of

BOTANICA YORUBA IFA LAJE, INC

(Name of Corporation as	currently filed with the Florida Dept. of State)	
P18000002554	•	
(Document N	umber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corpora	ation:	
		The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp." "In word "chartered," "professional association," or the abbre	c," or "Co". A professional corporation name musi	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		18 00
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		1 25 1 25
Name of New Registered Agent		න්තුර් න්ති නී
		C HI
	lorida street address)	<b>D</b> 020
New Registered Office Address:	, Florida	· Coder
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J		
Signature (	of New Registered Agent, if changing	<del></del>

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.

X.Change	<u>PT</u>	John Do	<u>c</u>	
$\underline{X}$ Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>sith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP		ALIAN M PALLAS	885 W 69 PLACE
Add				HIALEAH, FL 33014
X Remove				
2) Change		- <b>-</b>		<del></del>
Add				
Remove				<del></del>
3 ) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	r adding additiona ual sheets, if necess	ary). (Be specif	ic)			
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provisions for	implementing th	<u>a exchange, recia</u> e <u>amendment if n</u>	ssincation, or car ot contained in th	icellation of issued he amendment itse	i snares, elf:	
(if not app	olicable, indicate N	7/A)			· <del></del>	
<u></u>					<del></del>	
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	<del></del>					

	10/22/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.	
	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)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
10/22/2018 Dated	<u></u>	
selecte	irector, 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	_
арроіп	ted fiduciary by that fiduciary)	
	JUAN R VENDRELL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	