P18000017676

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(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AL PUNTO LA	TIN FOOD INC	
DOCUMENT NUMBER: P18000017676		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	matter to the following:	
LARRY MIRANDA		
	Name of Contact Person	n
	Firm/ Company	
12529 LAKE SQUARE C	IR	
(//OCID (4 (/N) //) 22021	Address	
KISSIMMEE, FL 32821		
	City/ State and Zip Cod	ů.
ALPUNTOLATINFOOD@GMA	AIL.COM	
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, pl	ease call:	
LARRY MIRANDA	939 at (428-0385
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Depa	artment of State:
■ \$35 Filing Fee & Certificate of Status		□\$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, F1, 32314	Amendment Section Amendment Section Division of Corporations P.O. Box 6327 Clifton Building	

Articles of Amendment to Articles of Incorporation of

AL PUNTO LATIN FOOD INC	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P18000017676	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	_
name must be distinguishable and contain the word "corporar" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.	
Name of New Registered Agent	
ıFlorida.	street address)
New Registered Office Address:	, Florida
	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing

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: <u>X</u> Change	<u>PT</u>	John Doe	
\underline{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>	<u>Address</u>
1) Change	VP	ANGEL MIRANDA	12529 LAKE SQUARE CIR
Add			ORLANDO, FL 32821
X Remove			
2) Change	 -		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary),	cles, enter change(s) (Be specific)			
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If an amendment provides for an exch provisions for implementing the ame	ange, reclassification adment if not contai	<u>a, or cancellation</u> ned in the amendi	of issued shares, nent itself:	
(if not applicable, indicate N/A)				

The date of each amendmen		, if other than th
date this document was signed		
Effective date if applicable:	MARCH 6 2018	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.	
☐ The amendment(s) was/we must be separately provid	are approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the hoard of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	3/6/18	
Signatufe_	Sa//e	
(1	By a director, president or other officer - if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
:1	ppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
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