P18000030841

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2022 AUG -8 PM 4: 43

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: EL CHURRASCA	SO GRILL CORP	
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JOSE ANTONIO CRUZ		
		Name of Contact Persor	1
	EL CHURRASCASO GRILL CORP		
		Firm/ Company	
	3694 W 12th AVE		
		Address	
	HIALEAH FL 33012		
		City/ State and Zip Code	2
	robertpache_85@yahoo.com		
		sed for future annual report	notification)
For further information	on concerning this matter, pleas	786	3400238
Name of Contact Person		at (at Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 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)
An Div P.C	niling Address nendment Section rision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EL CHURRASCASO GRILL CORP

FILED

(Name of Corporation as current	ly filed with the Florida Dept. of State)	4: 43
P18000030841	SECTION IN TAIL	
(Document Number o	of Corporation (if known)	ĒĹ
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendm	nent(s) to
A. If amending name, enter the new name of the corporation:	The ne	14'
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the wor	, ,,
B. Enter new principal office address, if applicable:	3694 W 12th AVE	
(Principal office address MUST BE A STREET ADDRESS)	HIALEAH FL 33012	
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 add new registered agent and/or the new registered office address Name of New Registered Agent		
(Florida st	reet address)	
New Registered Office Address:	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t:	
Signature of New I	Registered Agent, if changing	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	JOSE ANTONIO CRUZ	525 NW 73rd AVE
Add			MIAMI FL 33126
Remove			
2) X Change	VP	ROBERT PACHECO	7121 NW 174TH TERRACE
Add			APT 112
Remove 3) Change			HIALEAH FL 33015
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) h (Be specific)			
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		11		
f an amendment provides for an exprovisions for implementing the an	hange, reclassification endment if not contain	, or cancellation of is led in the amendmen	sued snares, t itself:	
(if not applicable, indicate N/A)				
			·-	
		<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, to document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following something to 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	
O8/04/2022 Dated Signature (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
JOSE ANTONIO CRUZ	
(Typed or printed name of person signing)	
PRESIDENT	(/ N
(Title of person signing)	SEUNCIANASSEE FU