P18000080651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2019 JUL 26 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FL

JUL 29 2019

C Kinsey

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 11, 2019

YSSEL V PEREZ
718 SW PORT ST LUCIE BLVD STE 9
PORT ST LUCIE, FL 34953

SUBJECT: GOOD FLAVOR LATIN RESTAURANT CORP
Ref. Number: P18000080651

We have received your document for GOOD FLAVOR LATIN RESTAURANT CORP and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood
Regulatory Specialist II

Letter Number: 619A00014035

RECEIVED
2019 JUL 26 PM 1:44

Articles of Amendment
to
Articles of Incorporation
of

GOOD FLAVOR LATIN RESTAURANT CORP

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

P18000080651

(Document Number of Corporation (if known)

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

A. 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."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

3304 ORANGE AVE
FORT PIERCE FL 34947

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

718 SW PORT ST LUCIE BLVD SUITE 9
PORT ST LUCIE FL 34953

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TALLAHASSEE, FL

D. 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: YSSEL V PEREZ

718 SW PORT ST LUCIE BLVD SUITE 9
(Florida street address)

New Registered Office Address: PORT ST LUCIE, Florida 34953
(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

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change	P	JOSE A FERNANDEZ	1232 SW MINYO AVE
____ Add			PORT ST LUCIE FL 34953
X ____ Remove			
2) ____ Change	VP	WILLIAM G RAMOS	691 SE PENN AVE
____ Add			PORT ST LUCIE FL 34984
X ____ Remove			
3) ____ Change	S	IRIA G FERNANDEZ	1232 SW MINYO AVE
____ Add			PORT ST LUCIE FL 34953
X ____ Remove			
4) ____ Change	P	YSSEL V PEREZ	490 SW LUCERO DR
X ____ Add			PORT ST LUCIE FL 34983
____ Remove			
5) ____ Change	VP	Esdras I. Perez	490 SW Lucero Dr Port St Lucie FL 34983
X Add			
____ Remove			
6) ____ Change			
____ Add			
____ Remove			

E. **If amending or adding additional Articles, enter change(s) here:**
(Attach *additional sheets, if necessary*). *(Be specific)*

F. **If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**
(*if not applicable, indicate N/A*)

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)

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

Adoption 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.

Dated 6-26-19

Signature _____
(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)

José A Fernández
(Typed or printed name of person signing)

President
(Title of person signing)