P18 0000 81471

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300333379963

09/03/19--01017--031 **35.00

FILED

19 SEP -3 PN 3: 31

SECURIAGE PT STATE

SEP 1 3 2819

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PIO PIO CUBAN	RESTAURANT CORP	
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
,	ALBERTO DUMENIGO		
-		Name of Contact Person	1
·	PIOPIO CUBAN RESTAUR	ANT CORP	
-		Firm/ Company	<u> </u>
6	5345 W 16 AVE		
-		Address	
1	HIALEAH FL 33012		
-		City/ State and Zip Cod	e
chachi	multiservices@yahoo.com		
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Alberto Dumenigo		at (9784027
Name o	f 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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PIO	PIO	CUBAN	RESTAU	IRANT	CORP
-----	-----	-------	--------	-------	------

(Name of Corporation a	s currently filed with the Florida Dept. of State)
P18000081471	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	itutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
	The new corporation." "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u>	$\frac{SS}{S}$
	- SE
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	$\frac{1}{2}$
	<u>3</u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent	
'	(Florida street address)
New Registered Office Address:	, Florida
	(Cuy) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Sionatur	e 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	<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) Change	VP	MARILIN GALIANO	811 EAST 37TH ST HIALEAHN F
X Add		,	
Remove			
2) Change			
Add			- SE
Remove			(NS) (NS) (NS) (NS) (NS) (NS) (NS) (NS)
3) Change			<u> </u>
Add			0.741 3
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damoro			

famending or adding additional Artic attach additional sheets, if necessary).	(Be specific)	
		· · · · ·
· · · · · · · · · · · · · · · · · · ·		
		
	 	
<u> </u>		
		- 20
		19
		SEP SEP
		185° 1
for amoundment municipal for an arch	ange, reclassification, or cancellation of issued shares.	79 CO
	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/4)		္လြန္က် မွာ ်
		31 115 116
		

	08/20/2019			
The date of each amendment(s) adopted this document was signed.	tion:	 -	if c	other than th
08/20/20	019			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this diment of State's records.	late will	not be	listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment ient for approval.	(s)		
	ed by the shareholders through voting groups. The following staten th voting group entitled to vote separately on the amendment(s):	ient		
"The number of votes cast for	the amendment(s) was/were sufficient for approval			
by		<u>;-1</u>		
	4	750	19	
☐ The amendment(s) was/were adopte action was not required.	(voting group) d by the board of directors without shareholder action and sharehold d by the incorporators without shareholder action and shareholder	ler i SSI	SEP -3	n
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	51 ST	PM 3:	D
08/20/2019 Dated		RIDA AIE	$\frac{\omega}{2}$	
Signature	Trance			
(By a direct selected, b	tor, president or other officer – if directors or officers have not beer y an incorporator – if in the hands of a receiver, trustee, or other con fiduciary by that fiduciary)			
AI.	BERTO DUMENIGO			
	(Typed or printed name of person signing)	•		
PR	ESIDENT			
	(Title of person signing)			