P180000085293

(Re	questor's Name)			
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COVER LETTER

TO: Amendment Section * Division of Corporations

NAME OF CORPORATION: EL REGALO MINIMARKET CORP. DOCUMENT NUMBER: P18000085293 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DARISLEYDI PEREZ RAMOS Name of Contact Person EL REGALO MINIMARKET CORP, Firm/ Company 3911 E 4 AVE Address HIALEAH, FL 33013 City/ State and Zip Code GARCIAMGM5703@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 3330343 Area Code & Daytime Telephone Number DARISLEYDI PEREZ RAMOS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

EL REGALO MINIMARKET CORP.

(Name of Corporation a	as currently filed with the Florida Dept. of State)
P18000085293	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statists Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the previation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>38</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 offinew registered agent and/or the new registered offi	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent:
Signatur	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.

X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Ь	_	YURIAN GUERRA GARCIA	556 E 17TH STREET
Add				HIALEAH, FL 33013
X Remove				
2) X Change	P		DARISLEYDI PEREZ RAMOS	556 E 17TH STREET
Add				HILEAH, FL 33013
Remove				
3) Change	<u>-</u>			
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		-		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
FROM THIS DATE, ALL THE PROFITS, LOSSES AND ACTIONS ARE THE UNIQUE PROPERTY OF DARISLEY
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)

	11-01-2018	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	01-2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this the document's effective date on the Do	block does not meet the applicable statutory filing requirements, topartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amend ifficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s)	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
Dated	× 792	
(By a d selecte	rector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othe ted fiduciary by that fiduciary)	
	DARISLEYDI PEREZ RAMOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	***

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