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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MARY'S SABOR	LATINO INC				
DOCUMENT NUM	D18000004014		<u>_</u>			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	YASMIN HERNANDEZ					
	Name of Contact Person					
	MARY'S SABOR LATINO INC					
	Firm/ Company					
	4337 WEST KENNEDY BL	VD				
		Address				
	TAMPA, FL 33609					
	_	City/ State and Zip Code				
	MINAHHERNANDEZ@YA	ноо.ссом				
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
YASMIN HERNAN	DEZ	at (810.2929			
Name	of Contact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a check (or the following amount made	payable to the Florida Depa	ortment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

MARY'S SABOR LATINO INC	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P18000094914	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
DOÑA KITCHEN INC	The new
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.	A professional corporation name must contain the word
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)	PILE AM
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addres	dress in Florida, enter the name of the
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	, Florida
Signature of New	Registered Agent, if changing
Signature of New	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

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 Do	<u>DE</u>	
X Remove	<u>v</u>	Mike Jo	ones	
_X Add	<u>\$V</u>	Sally Sr	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	VP		MIGUEL A. LUGO-AGRAMO	4337 WEST KENNEDY BLVD
Add				TAMPA, FL 33609
X Remove				
2) Change	VP	_	MIGUEL A. LUGO-HERNANDEZ	4337 WEST KENNEDY BLVD
X Add				TAMPA, FL 33609
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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If an ar	nendment provide:	s for an exchi					
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) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	is block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend e sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following so for each voting group entitled to vote separately on the amendment(s)	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
01/24/29 Dated	020	
sele	a director, president or other officer – if directors or officers have not ected, by an incorporator – if in the hands of a receiver, trustee, or othe ointed fiduciary by that fiduciary)	
	YASMIN HERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	