P18000009201

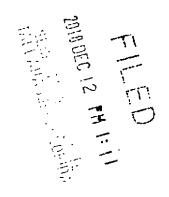
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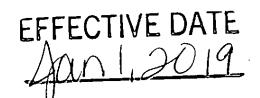
I ALBRETTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOI	RATION: EMMANUEL'S K	ITCHEN DESIGN, INC.			
DOCUMENT NUMI	P18000099201				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	ELYSABET MONTANEZ				
		Name of Contact Person	1		
	MULTI BUSINESS CENTER, CORP.				
		Firm/ Company			
	7336 W 20TH AVENUE				
	· · · · · · · · · · · · · · · · · · ·	Address			
	HIALEAH, FL 33016				
		City/ State and Zip Cod	e		
тах	CENTERUSA@LIVE.COM				
	_	sed for future annual report	notification)		
	E min decrease (i.e. or ii.	, , , , , , , , , , , , , , , , , , , 	,		
For further information	n concerning this matter, pleas	se call:			
ELYSABET MONTANEZ		at (<u>305</u>	828-9696		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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)		
Ame Divi P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amenc Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation



EMMANUEL'S KITCHEN DESIGN, INC.

(Name of Corporation as curren	itly filed with the Florida Dept. of State)
P18000099201	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	556 W 27TH STREET
(Principal office address MUST BE A STREET ADDRESS)	HIALEAH, FL 33010
	59 B 7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	556 W 27TH STREET
	HIALEAIL FL 33010
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent. I am familian	r 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X 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	Manuel Prieto Alvacez	556 W 27 54
Add			HIAKAH H 33010
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument it not contained in the amendment tesen.

· · · · · · · · · · · · · · · · · · ·	DECEMBER 7TH 2018	, if other than the
The date of each amendment(s date this document was signed.	adoption:	, it office than the
J Effective date <u>if applicable</u> :	JANUARY 1ST 2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(se sufficient for approval.	;)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	rnt
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated Signature	MBER 7TH 2018	
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other cour ointed fiduciary by that fiduciary)	t
	MANUEL PRIETO ALVAREZ	
	(Typed or printed name of person signing)	
	PRESIDENT / SHAREHOLDER	
	(Title of person signing)	