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C. GOLDEN

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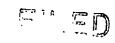
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LOS ANTOJOS F	RESTAURANT	INC	
DOCUMENT NUME		·		
The enclosed Articles	of Amendment and fee are s	ubmitted for filir	ıg.	
Please return all corres	pondence concerning this ma	atter to the follow	ving:	
	STEPHANIE MARTINEZ			
	ATPLUS CORP	Name of Co	ntact Perso	n
	8180 NW 36 ST SUITE 406	Firm/ C	ompany	
,	DORAL FL 33166	Add	ress	
-		City/ State as	nd Zip Cod	e
ATPL	US@LIVE.COM			
	E-mail address: (10 be u	sed for future an	nual report	notification)
For further information	concerning this matter, pleas	se call:		
STEPHANIE MARTII	NEZ	31 (³	05	406-3800
Name o	u. (_	Агса Со	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Fl	orida Depa	artment of State:
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filit Certified Co (Additional enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address idment Section ion of Corporations Box 6327 nassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



LOS ANTOJOS RESTAURANT, INC

2019 JUL -3 PH 4:33

P19000009462	The state of the s	ith the Florida Dept. of State)
	(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 607 ts Articles of Incorporation:	7.1006, Florida Statutes, this <i>Florida F</i>	Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co". A	The new pany," or "incorporated" or the abbreviation professional corporation name must contain the
B. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>		
	 .	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office address in Flo w registered office address:	orida, enter the name of the
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	nd/or registered office address in Flo w registered office address:	orida, enter the name of the
new registered agent and/or the ne	nd/or registered office address in Flow registered office address: 11099 BISCAYNE BLVD	orida, enter the name of the
new registered agent and/or the ne	w registered office address:	
new registered agent and/or the ne	w registered office address: 11099 BISCAYNE BLVD	

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> Joh	n Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	v Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP .	JOHAN A CASTELLANOS	13651 NE 1ST AVE
Add			MIAMI FL 33161
X Remove			
2) X Change	P	LEIDY VERGARA	11099 BISCAYNE BLVD
Add			MIAMI FL 33161
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			•
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f 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)	amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendme cient for approval.	nt(s)
☐ The amendment(s) was/were appromust he separately provided for ea	wed by the shareholders through voting groups. The following state ich voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareho	older
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
06/25//2019		
Dated	der Vergara	
selected, l	etor, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other offiduciary by that fiduciary)	en ourt
Li	EIDY VERGARA	
 -	(Typed or printed name of person signing)	
PE	RESIDENT	
	(Title of person signing)	