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2019 FEE 22 P 4- 82 SLORETARY OF STATE

T. LEWIELK

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SANO FOOD SOU	JTH MIAMI CORP		
DOCUMENT NUMB	P19000011485			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	WILMER M ESCARAY BR	UNO		
		Name of Contact Person	n	
-		Firm/ Company		
	6610 NW 105 PL			
		Address		
	DORAL FL 33178			
		City/ State and Zip Cod	e	
sanofe	odsouthmiami@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Wilmer Escaray		at (⁷⁸⁶		
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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations Building	
Tallahassee, FL 32314		2661 Executive Center Circle		

Taliahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

SANO FOOD SOUTH MIAMI CORP

0000011485	2019 FEB 22 P 1: 82
(Document N	Number of Corporation (if known) SECRETARY OF STATE
	TALLAHASSEF JELIOS VALLALIA
suant to the provisions of section 607,1006, Florida Statu	ntes, this Florida Profit Corporation altopis the following amondment
Articles of Incorporation:	
If amending name, enter the new name of the corpora	ration:
	The new
ne must be distinguishable and contain the word "co orp.," "Inc.," or Co.," or the designation "Corp," "In rd "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the eviation "P.A."
Enter new principal office address, if applicable:	NA
incipal office address MUST BE A STREET ADDRESS	55)
<u></u>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	NA
If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	
NΛ	
Name of New Registered Agent NA	
Name of New Registered Agent NA	
Name of New Registered Agent	(Florida street address)
Name of New Registered Agent (F	
Name of New Registered Agent	(Florida street address), Florida (City) (Zip Code)

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	PT	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) Change	P	BRUNO, YRENE	7209 SW 59 AVE SOUTH	
Add X Remove			MIAMI, FL 33143	
2) Change	VP	VILLALOBOS, MANUEL	7209 SW 59 AVE SOUTH	
Add X			MIAMI, FL 33143	
Remove 3)Change	P	SANCHEZ, JHON ROBERT	7209 SW 59 AVE SOUTH	
X Add			MIAMI, FL 33143	
Remove	M	MUNOZACI IANI IANDA	7200 (32/50 ALVE COUTE)	
4) Change	VP	MUNOZ MELIAN, LAURA	7209 SW 59 AVE SOUTH	
X Add Remove			MIAMI, FL 33143	
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)	
NA NA	
	······
	**
	•
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)	
NA	
	•

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(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 date wirtment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
2/19/2019		
Signature	petor, president or other officer – if directors or officers have not been	
(By a dir selected,	bector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diffduciary by that fiduciary)	
_	TRENE BILING. (Typed or printed name of person signing)	·
	(Typed or printed name of person signing)	
	(Title of person signing)	
_	(Title of person signing)	