P19000 0aa a5a

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



500331911285

07/26/13--01017--004 **35.00

TELL ZED

ING G1 110 TECHNOEDER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: THE	CAVE LATIN	FOOD CORP
DOCUMENT NUMBE	R: P19000	022252	<u> </u>
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	\	10 100	
_	<u></u>	Name of Contact Person	
	The (Cave Lati	N FOOD CORP
		Firm/ Company	
	1430 4	Address FL 33 City/ State and Zip Cod	
_	^ ·	Address	
	1 Diami	FL 33	145
_	Milairi	City/ State and Zip Cod	e
		, ,	
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
<u> </u>	1 JANEZ	at (de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he 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)
	ng Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	assee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incor	poration
the Caue Latin	4 FOOD COED
(Name of Corporation as currently f	
	<i>2</i> 52
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.,	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1430 SW 18 St Hami, FL 33145
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1430 SW 10 St 4. ami, FL 33145
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent JOAN JA	WEZ I
New Registered Office Address: Prami, 1	10 St
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	

Page 1 of 4

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	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> P</u>	CILIANA SANCHEZ	8870 NW 36 St # 320
Add			boral, FL 33178
<u></u> ✓ Remove			
2) Change	P	JUAN YANEZ	1430 SW 18 St Mami, FC 33145
Remove			
3) Change			
Add			-1 0
Remove			
4) Change			C C
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)		
		· · · -
	` <u>.</u>	(1)
		
	7,7	?>
		ď٦
	••	7761 1321
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)	#57	••
(g mor spyrocame, material vary)		

The date of each amendment(s) adoption:	7-16-19	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	7-16-19	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements f State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CF	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amer approval.	ndment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholders through voting groups. <i>The following</i> group entitled to vote separately on the amendment	statement (s):
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by		
(vo	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	areholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	older
Dated 7-16-		19
Signature	eau Janes.	
(By a director pre-	sident or other officer - it directors of officers have no	ot been get on
	orporator – if in the hands of a receiver, trustee, or of	her courts
appointed fiduciar	y by that fiduciary)	her courts 2
	T	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	, -
<u>-</u>	President	
	(Title of person signing)	