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DEC 1 . 5050

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DON LUCHO'S L	ATIN CAFE INC		
DOCUMENT NUMB	ER: P19000044173			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	LUIS EYZAGUIRRE			
•	····	Name of Contact Persor	1	
	DON LUCHO'S LATIN CAFE INC			
-	Firm/ Company			
	475 NW 33RD TERRACE			
-		Address		
	POMPANO BEACH, FL 330	069		
	City/ State and Zip Code			
	łouiseyza ł ł @gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas		2048215	
Name of Contact Person		at (at (de & Daytime Telephone Number	
	the following amount made			
☐ \$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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DON LUCHO'S LATIN CAFE INC

(Name of Corporation as currently	filed with the Florida Dept. of St	ate)	
P19000044	173		
(Document Number of C	lorporation (if known)	 -	
Pursuant to the provisions of section $607,1006$. Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts th	ne following amen	idment(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."			rp"
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)			
			20;
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of t	he 37.5	6 - AON 02
Name of New Registered Agent			•
			6. 01
(Florida stree	(address)		رخ رخ
		, 。	=
New Registered Office Address:((<u> </u>	1a(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit	h and accept the obligations of the	position,	
Signature of New Reg	istered 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)

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:	13.17	L E. IX	
X Change	<u>17 [</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	DEBORAH MARTINEZ ROMERO	475 NW 33rd TERRACE
XAdd			POMPANO BEACH, APT 203
Remove			FL. 33069
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
AdJ			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	(Be specific)
_	
	
	
If an amendment provides for an each	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

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The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	JUNE 10th, 2020	
	(no more than 90 days after amendment file	date)
	this block does not meet the applicable statutory filing require the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sl	hareholder action and shareholder
	re adopted by the shareholders. The number of votes east for there sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/we must be separately provid	re approved by the shareholders through voting groups. The for ed for each voting group entitled to vote separately on the amer	llowing statement idment(s):
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
LUIS EYZAGU	HRRE "	
by	(voting group)	
Dated	SE 8th, 2020	
(I s	By a director, president or other officer – if directors or officers elected, by an incorporator – if in the hands of a receiver, truste ppointed fiduciary by that fiduciary)	
	LUIS EYZAGUIRRE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	