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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ANDINO'S FACT	ORY GROUP INC		
DOCUMENT NUMBI	D10000050140			
The enclosed $Articles\ o$	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	ter to the following:		
		ROSMAIRA VALE		
<del>-</del>	Name of Contact Person			
	AN	DINO'S FACTORY GROU	JP INC	
-		Firm/ Company		
	2102	WALDEN PARK CIR AP	PT 302	
-		Address	· · · · · · · · · · · · · · · · · · ·	
		KISSIMMEE, FL 3474	4	
_		City/ State and Zip Code	2	
<del></del>	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
ROS	SMAIRA VALE	.407	486-6332	
Name of Contact Person		at ( Area Co	)de & Daytime Telephone Number	
Construction about Con-	45 - C.Hi 1 .		*	
incrosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)	
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301	

## Articles of Amendment to

## Articles of Incorporation

of

### ANDINO'S FACTORY GROUP INC

P19000059149				
(Document Number	er of Corporation (if kno	wn)		
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this <i>Florida Profit Corp</i> e	oration adopts the follow	ving amendr	nent(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>			
N/A			The ne	
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviation	or "Co". A professiona	"incorporated" or the il corporation name mu	abbreviatie	on
B. Enter new principal office address, if applicable:	N/A			_
(Principal office address MUST BE A STREET ADDRESS)			2(	
			<u> </u>	-
			<del>- 3</del>	- 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		-7	K 1974
(Studing dualess MAT BE A FOST OFFICE BOX)	<del></del>	1.	<u> </u>	- • <b>b</b> g
				. <del>و</del> شد رف
	<del></del>		• •	_
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	address in Florida, ente	r the name of the		
NIA	14.55.			
Name of New Registered Agent				
(Florid	a street address)			
NIA	a sireer addiressy			
New Registered Office Address:	(City)	, Florida	ip Codei	-
	, , , ,	1/2	ip code,	
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	tent:	httimetinin Sahii iniila		
— — — — — мурттикт из registeren ugent. 1 ит јити	на мин ана ассерстве о	ougations of the position	11.	
Signature of Ne	w Registered Agent, if ci	hanging		

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: <u>X</u> Change	<u> </u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) X Change	PART	SERGIO JESUS GARCIA M	2102 WALDEN PARK CIR	
Add			APT 302	
Remove			KISSIMMEE, FL 34744	
2) Change	PART	ANGEL MEDINA	2102 WALDEN PARK CIR	
Add			APT 302	
X Remove			KISSIMMEE, FL 34744	
3 ) Change	PART	MARLON R. GARCIA	2102 WALDEN PARK CIR	
XAdd			APT 302	
Remove			KISSIMMEE, FL 34744	
4) Change	PART	SERGIO GARCIA TABORDA	2102 WALDEN PARK CIR	
XAdd			APT 302	
Remove			KISSIMMEE, FL 34744	
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>It am</u> (Attac	ending or adding additional Articles, enter change(s) here:  Nudditional sheets, if necessary). (Be specific)
PLEASE	ADD IN THE ADDRESS TO ALL MEMBERS THE APARTMENT 302
F. <u>If an :</u>	imendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	isions for implementing the amendment if not contained in the amendment itself; if not applicable, indicate N/A)
N/A	
. <u>.</u>	

·	08/30/2019	
The date of each amendment(s) a	doption:	if other than the
date this document was signed.		
	0/2019	
Effective date if applicable:		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment efficient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ient
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	opted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
09/18/2019 Dated		
Signature 50	raine avalles.	
(By a d selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couled fiduciary by that fiduciary)	ırt
	ROSMAIRA A. VALE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>