## P19 0000 79031



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: RESTAURANTE	EL SABOR LATINO 2 CC	ORP	
DOCUMENT NUM	P19000079031			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	EDGAR PEREZ			
	·	Name of Contact Person	1	
	RESTAURANTE EL SABO	R LATINO 2 CORP		
		Firm/ Company		
	2202 JOG ROAD			
	<del></del>	Address		
	GREENACRES FL 33415			
	City/ State and Zip Code			
	QINGQIAN716@GMAIL.C	OM		
	<del>-</del> -	sed for future annual report	notification)	
For further informat	on concerning this matter, plea		9067772	
Name	Name of Contact Person at (561 ) 9067772  Area Code & Daytime Telephone I			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P19000079031		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following	amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
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."		
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		2024
		<u></u>
		<u></u>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
		<u></u>
		ယ်
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the	
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	. Florida	
	City) eZip C	ode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and account the obligations of the maritim	
rnerto, accept the appointment as registered agent. I am jamitar wi	an una accept the obligations of the position.	
Signature of New Reg	gistered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (s	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: X Change	<u>PT</u>	John Doc	
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	VP	FRANCISCO PEREZ GARCIA	1006 ASPRI WAY
X Add			RIVIERA BEACH FL 33418
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

E. If amending or adding addi	nonai Arucie	s, enter change(s)	nere.		
(Attach additional sheets, if no	ecessary). (	Be specific)			
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. If an amendment provides I	<u>for an exchan</u>	ge, reclassification	<u>i, or cancellation</u>	<u>of issued shares,</u>	
If an amendment provides I provisions for implementing	ig the amend	ment if not contain	ned in the amend	ment itself:	
(if not applicable, indica	ate N/A)				
, , ,					
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The date of each amendment(s) adoption: 07 51 2022 . if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by
(voting group)
07/31/2024 Dated Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
EDGAR PEREZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)