## P200000 11364

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Robento's fer	noe and rive coxp
document number: <u>\$2000011364</u>	
The enclosed Articles of Amendment and fee are submitted for filli	ng.
Please return all correspondence concerning this matter to the follo	wing:
7632 NW 3RD AV  Add  Add  City/ State a	ompany
For further information concerning this matter, please call:	
Name of Contact Person at (	766 ) 975 6250 Area Code & Daytime Telephone Number
•	
Enclosed is a check for the following amount made payable to the l	Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Fil Certificate of Status \$\Bigcup (Additional enclosed)\$	Opy Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

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Articles of Inco	orporation O a V / a
Partie of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	.  Florida Profit Corporation adopts the following amendment(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."	professional corporation name must contain the word
B. Enter new principal office address, if applicable:	207
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	20.00 HAR
	. 30
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PH 12:
	25
D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida City) (Zip Code)
,	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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, an 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 = Chie 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.

X Change	<u>PT</u>	John D	υς	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	1	Name (	<u>Addres</u> s
1) Change	_V ŧ	<u>&gt;</u>	Carlos Juavez Fr	4761 NW 2nd Ter HIAMI PL 33126
X Add	1		V	HIRMI fl 33126
Remove				
2) Change				<del></del>
Add				
Remove Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional	Iding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)
the 1	number of shares the antoxation Authorized to some is: sa
19	Authorized to save 18:50)
·	
	<del></del>
	provides for an exchange, reclassification, or cancellation of issued shares,
	aplementing the amendment if not contained in the amendment itself:  (able, indicate N/A)
01	
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Cax los	Juaxe? It 1 250 ghai
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	·

The date of each amendment(s) adoption: 3/27/2020 date this document was signed.	, if other than th
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 we document's effective date on the Department of State's records.	all not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	nd shareholder
☐ 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 cast for the amendment(s) was/were sufficient for approval	
by	
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)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	· · · <del>- · ·</del>

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