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(Do	cument Number)	
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[SV]

COVER LETTER

Division of Corporations NAME OF CORPORATION: Hestia The Good Kitchen Corp DOCUMENT NUMBER: P 2000019720 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ludin Hernandez Warsans Firm/ Company 14572 SVV 142 nd Terrace
Address Liaui, FL 33186 City/ State and Zip Code Mestia 2 party & 6 mail - com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (305) 796-8858

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **≸**\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Hestia the Good Kitchen Cord

TIESTIA IME 6000 KITCHEN COTP.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P 200000 19720	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amend its Articles of Incorporation:	dment(s) to
A. If amending name, enter the new name of the corporation:	
HESTIA Party decorations & catering corp. The paramemust be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the wind "chartered," "professional association," or the abbreviation "P.A."	new p., " ord
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2	1 17 5 46 ABVISED IS 1 75 5 46 ABVISED IS 17 75 17 17 1
Name of New Registered Agent	<u>:-</u>
(Florida street address)	
New Registered Office Address:	
(City) (Zip Code)	_
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered 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: XChange	<u>PT</u>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		-
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	·· · · · · · · · · · · · · · · · · · ·	_		
Add				
Remove				

i. If	amending or adding additional Articles, enter change(s) here:
(A	tach additional sheets, if necessary). (Be specific)
<u>.</u>	
. <u>Iſ</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
p	rovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)

The date of each amendment(s) adoption:	03-18-2020	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, thatae's records.	is date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the in- action was not required.	corporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amenda proval.	nent(s)
• /	shareholders through voting groups. The following staroup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amend	ment(s) was/were sufficient for approval	
by		
by(voting	g group)	
N= -19-	2020	
Dated		
	ent or other officer - if directors or officers have not b	 peen
selected, by an incorp	orator - if in the hands of a receiver, trustee, or other	
appointed fiduciary b		
 	din Hernandez	
(Ty	yped or printed name of person signing)	
	President	
(Ti	itle of nerson signing)	