P20000040184

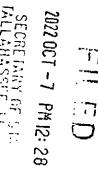
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: EL MERCADO MIAMI, INC DOCUMENT NUMBER: P20000040184 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dainerys Echevarria Name of Contact Person EL MERCADO MIAMI INC Firm/ Company 1801 NW 7TH ST, UNIT 5 Address MIAMI FL 33125 City/ State and Zip Code ECHEVARRIADAINERYS@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DAINERYS ECHEVARRIA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



EL MERCADO MIAMI INC

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation	on as currently filed with the Flor	rida Dept. of State)
P20000040184		
(Docum	ent Number of Corporation (if kno	own)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc," "chartered," "professional association," or the abbre	or "Co". A professional corpe	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>x</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	Florida(Zip Code)
	, , , , ,	, ,
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		obligations of the position.
Signa	nture of New Registered Agent, if ch	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: X Change	<u>PT</u> <u>John</u>	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> Sail	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>r l</u>	MICHELE CRUZ	1895 VENICE PARK DR #A16
Add			MIAMI FL 33181
X Remove			
2) Change	PT_	_Jennifer Lopez_Yaufa	<u>7951 NE BAYSHORE DR</u> Apt 1902, Miami, FL 33138
Add			Apt 1902, Miann, FL 33130
X Remove Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	<u> </u>
Add			-
_ Remove			

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)
	
	,
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
•	

• .

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•	08/16/2022	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statutory filing repartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors with	hout shareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes casufficient for approval.	t for the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the	
"The number of votes case	for the amendment(s) was/were sufficient for appro-	oval
by MAJORITY SHARE	HOLDERS	**
-, <u></u>	(voting group)	_
U8/16/202	2	
DatedSignature) and	
selecte	irector, resident or other officer – if directors or off d, by an incorporator – if in the hands of a receiver, ted tiduciary by that tiduciary)	ficers have not been trustee, or other court
	DAINERYS ECHEVARRIA	
	(Typed or printed name of person signing	g)
	PRESIDENT	
	(Title of person signing)	