P20000055919

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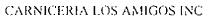
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CARNICERIA LOS AMIGOS INC				
DOCUMENT NUMBER: P20000055919				
The enclosed Articles of	f Amendment and fee are sul	omitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
HECTOR GUTIERREZ				
Name of Contact Person				
CARNICERIA LOS AMIGOS INC				
_		Firm/ Company		
1	165 E PLANT STREET SU	ИТЕ 9		
_		Address		
V	VINTER GARDEN, FL 3478	87		
		City/ State and Zip Code		
_	E mail a library to have	ed for future annual report notification)		
	15-mail address, (to be us	ed for future amular report notifications		
For further information	concerning this matter, pleas	se call:		
HECTOR GUTIERREZ	2	at (321) 947 - 9215 Area Code & Daytime Telephone Number		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 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)



P20000055919			0
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the following	ag amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			Thenew
	Torp," "Inc," or "Co".	"company," or "incorporated" or the abbreviati A professional corporation name must conta 1."	
B. Enter new principal office address,	if applicable:	1165 E PLANT STREET SUITE 9	
	(Principal office address MUST BE A STREET ADDRESS)		
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> <u>OFFICE BOX</u>)	1165 E PLANT STREET SUITE 9	····
		WINTER GARDEN, FL 34787	
new registered agent and/or the new Name of New Registered Agent	w registered office addre		_
	1165 E PLANT STREE		_
		street address)	
New Registered Office Address:	WINTER GARDEN	Florida 34787	
		(City) (Zip	Code)
New Registered Agent's Signature, if c	hanging Registered Age	nt:	
I hereby accept the appointment as regist	tered agent, -l am familia	r 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 p	oursuant to s. 607,0120 (1	H) (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)

Example:

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.

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)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change		<u> </u>	 	
Add				
Remove				
2) Change		-	 	
Add				
Remove 3) Change			 	
Add				
Remove				
4) Change			 	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

tach additional sheets if nea	ional Articles, enter cl			
action in the sace is, if her	cessary) (Be specific	c)		
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n amendment provides fo ovisions for implementing (if not applicable, indicar	g the amendment if no	ot contained in the am	endment itself:	
ovisions for implementing	g the amendment if no	ot contained in the am	endment itself:	

	08/04/2020	
The date of each amendment(s) add	option:	, if other than the
date this document was signed.	22020	
08/04/ Effective date if applicable:	-2020	
	(no more than 90 days af	er amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep		atory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of o	lirectors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number ficient for approval.	of votes cast for the amendment(s)
	oved by the shareholders through voti ach voting group entitled to vote sepa	
	or the amendment(s) was/were suffici-	
bv		,"
•	(voting group)	
Dated 8 - C	25-2020	
Standing		
selected!	ector, president or other officer – if di by an incorporator – if in the hands o d fiduciary by that fiduciary)	
1	IECTOR GUTIERREZ	
_	(Typed or printed name of p	person signing)
j	PRESIDENT	

(Title of person signing)