P20000078810

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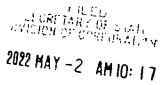
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SANCHEZ FAMIL	Y GENERAL SERVICE	NC
DOCUMENT NUME			·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ORLANDO SANCHEZ		
		Name of Contact Person	1
		Firm/ Company	
	10535 SW 170 ST		
		Address	
	MIAMI, FL, 33157		
		City/ State and Zip Code	
	SUPERMARKET@SANCH	EZ-FAMILY.COM	
	E-mail address; (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
ORLANDO SANCHE	zz	786 at (4442559
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
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)
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303





SANCHEZ FAMILY GENERAL SERVICE INC

(Name of	Corporation as curre	ntly filed with the Flori	da Dept. of State)
P20000078810			
	(Document Number	r of Corporation (if know	vn)
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, th	nis Florida Profit Corpor	ration adopts the following amendment(s)
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and contain the 'Inc.," or Co.," or the designation "Co'chartered," "professional association,"	orp," "Inc," or "Co".	A professional corpor	orated" or the abbreviation "Corp.," ration name must contain the word
Linear and a street and a street and a street	f annlisable:	N/A	
 Enter new principal office address, in Principal office address <u>MUST BE A ST</u> 		 	<u></u>
Enter new mailing address, if applic		N/A	
). If amending the registered agent and	l/or registered office a	ddress in Florida, enter	the name of the
new registered agent and/or the new	registered office addr	ess:	-
Name of New Registered Agent	N/A		
-	(Florida	street address)	
N. B.: 1000 111			F1
New Registered Office Address:		(Citv)	, Florida (Zip Code)
		•••	•
iew Registered Agent's Signature, if ch			
hereby accept the appointment as registe	red agent. I am famili	ar with and accept the ob	oligations of the position.
	Signature of Nev	v Registered Agent, if ch	anging
	org. with a dy free	· ···· Gioroi da rigerii, y dii	**************************************
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)

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 Doe	
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>	Address
1) Change	P	ORLANDO L SANCHEZ	10535 SW 170 ST
X Add			MIAMI, FL, 33157
Remove 2) X Change	v	JESSICA SANCHEZ	10535 SW 170 ST
Add			MIAMI, FL, 33157
Remove 3) Change			
Add			
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

. If amending or adding a (Attach additional sheets,	idditional Articles, if necessary). (Be	enter change(s) e specific)	here:		
'A					
					
	<u> </u>	<u>-</u>			
"					
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If an amendment provi	des for an exchange	e, reclassificatio	n, or cancellation	of issued shares,	
provisions for impleme	enting the amendm	ent if not conta	ined in the ameno	lment itself:	
(if not applicable, i	ndicate N/A)				
A					
				<u> </u>	
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	<u></u>			_	
					

	04/26/2022	
	loption:	, if other than the
date this document was signed.	/2022	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	地震的
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	for the amendment(s) was/were sufficient for approval	量影
by	(voting group)	<i>Q</i> =:
	(voting group)	<u> </u>
4/26/2022		
Dated	<u></u>	
C	AL.	
Signature	· XX	
	rector, president or other officer - if directors or officers have not been	
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
арропи	ed fiducially by that fiduciary)	
	ORLANDO L SANCHEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	