P21000020571

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<u> </u>
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	cument Number)	<u></u> .
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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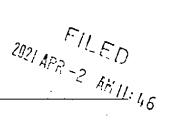
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LAZ CARNITAS	INC.			
DOCUMENT NUME					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	itter to the following:			
	PAZ BADAY				
	 -	Name of Contact Persor	1		
	LAZ CARNITAS INC.				
	Firm/ Company				
	3305 N FEDERAL HWY				
		Address			
	POMPANO BEACH, FL 330	064			
	City/ State and Zip Code				
	EMYBADAY2008@GMAII	L.COM			
		sed for future annual report	notification)		
For further information PAZ BADAY	n concerning this matter, pleas		600-6147		
Name of Contact Person		ai (Area Co) 600-6147 de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made				
☐ \$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)		
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



LAZ CARNITAS INC.

(Name of Corporation as cu	urrently filed with the Florida Dept. of State
P21000020571	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
	The _ new on," "company," or "incorporated" or the abbreviation "Corp.," co". A professional corporation name must contain the word "P.A."
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) D. If amending the registered agent and/or registered officency registered agent and/or the new registered office ac 	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered 2 I hereby accept the appointment as registered agent. I am fan	(City) (Zip Code) Agent: niliar with and accept the obligations of the position.
Signature of i	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)

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)	Title	Name	<u>Addres</u> s
1) Change	V	LAZARO PEREZ	900 SW 116TH WAY
XAdd			POMPANO BEACH, FL. 33064
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
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an amendment pro provisions for imple (if not applicable	ementing the amer	iange, reclassifica ndment if not con	tion, or cancellat tained in the am	ion of issued sharendment itself:	25,

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	03/18/2021	
The date of each amendment(s) ad-		, if other than the
date this document was signed.		
	/2021	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blodocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted action was not required.	sted by the incorporators, or board of directors without shareholder a	nction and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendme ficient for approval.	ent(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
(By a dir selected, appointe	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary) PAZ BADAY (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
F	PRESIDENT	

(Title of person signing)