P21000035142

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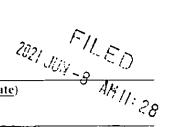
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CHILACOS INC					
DOCUMENT NUMB	ER: <u>P21000035142</u>					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	ABRAHAM ZIADEH					
	Name of Contact Person					
	ABRAHAM ZIADEH CPA PA					
		Firm/ Company				
	9000 SHERIDAN STREEET	SUITE 140				
		Address				
	PEMBROKE PINES, FL 330)24				
		City/ State and Zip Cod-	<u> </u>			
	abraham(&ziadehepa.com					
	•	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:	051-1410			
Name o	f Contact Person	at (de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	ariment of State:			
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐852,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI, 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

CHILACOS INC



(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: CHILACOS TACOS INC name must 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 word "chartered," "professional association," or the abbreviation "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 office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: ______

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, Freasurer, 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 Doe</u>				
X Remove	<u>v</u>	Mike Jones				
X Add	\underline{SV}	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) X Change	D	ALVARO TOBAR	11901 W SUNRISE BLVD			
Add			PLANTATION, FL 33323			
Remove						
2) X Change	P	ULISSES BORGES DE SOUZA	11901 W SUNRISE BLVD			
Add			PLANTATION, FL 33323			
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

<u>If amendi</u> (Attach <i>ad</i>	ing or adding additional sheets, if	ditional Article necessary). (s, enter chang Be specific)	e(s) here:			
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<u>If an ame</u>	endment provide	s for an exchan	ge, reclassific:	ation, or cance	<u>llation of issued</u>	d shares.	
<u>provisio</u> (il na	ns for implement of applicable, ind	<u>iing the ameno</u> icate N/A)	meni ii not coi	uramed m me	amenument us	en.	
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	06/01/2021	
The date of each amendment date this document was signed.	(s) adoption:	, if other than the
Effective date if applicable:		
-	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date e Department of State's records.	; will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	e adopted by the incorporators, or board of directors without shareholder action	i and shareholder
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.)
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	1/
"The number of votes	cast (or the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
06/01/2 Dated	2021	
Signature	Ulissas Soula	
(By sel	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court sointed fiduciary by that fiduciary)	
	ULISSES BORGES DE SOUZA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	