P21000067281

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LA TERRAZA BAKERY MY CORP					
DOCUMENT NUMBER: P21000067281					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
MELQUIS YESID CORDOBA TORRES					
Name of Contact Pers	Name of Contact Person				
LA TERRAZA BAKERY MY CORP	LA TERRAZA BAKERY MY CORP				
Firn√ Company					
863 STATE ROAD 436 EAST					
Address					
CASSELBERRY, FL 32707	CASSELBERRY, FL 32707				
City/ State and Zip Co	de				
MELQUISTESID@GMAIL.COM					
E-mail address: (to be used for future annual repo	rt notification)				
For further information concerning this matter, please call: MELQUIS YESID CORDOBA TORRES 407 664-9711					
at (ode & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\Bigcup \subseteq \s	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Amendment Section Amer Division of Corporations Divis P.O. Box 6327 The	et Address Indiment Section Indion of Corporations Centre of Tallahassee In Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LA TERRAZA BAKERY MY CORP

(Name of Corporation as current)	y filed with the Florida Dept. of State)
P21000067281	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". c"chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
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 add new registered agent and/or the new registered office address 	
Name of New Registered Agent	<u></u>
(Florida str	eet address) . Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar s	
Signature of New R	egistered Agent, if changing
Ch. L.W. P. M.	

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, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc 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 Doc, 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PRES	YESID M. CORDOBA TORRES	863 STATE ROAD 436 EAST
Add X Remove			CASSELBERRY, FL 32707
Remove 2) Change	PRES	Melquis Yesid Cordoba Torres	863 STATE ROAD 436 EAST
X Add	-,		CASSELBERRY, FL 32707
Remove 3) Change			
Add			
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	··· <u>-</u>
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(ij noi applicame, maicale iv/A)	

.

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amends	nent file date)
Note: If the date inserted in this I document's effective date on the D		g requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes conflicient for approval.	ast for the amendment(s)
	proved by the shareholders through voting groups, each voting group entitled to vote separately on t	
"The number of votes case	for the amendment(s) was/were sufficient for app	roval
by		"
	(voting group)	
	08/12/2021	of Grand have not have
selecte	d, by an incorporator – if in the hands of a receive ted fiduciary by that fiduciary)	
	MELQUIS YESID CORDOBA TORRES	
	(Typed or printed name of person sign	ning)
	PRESIDENT	
	(Title of person signing)	