P21000069657

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FALLAHASSEE, FI OBINA

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S. PRATHER

COVER LETTER

BOW CATERING CORP NAME OF CORPORATION: P21000069657 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person calcong Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & **\$35** Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 **Street Address**

Amendment Section
Division of Corporations
The Centre of Tallahassee

(Additional Copy is enclosed)

Articles of Amendment to

	Articles of Incorporation	, 2
	of	E C
BOW CATERING CORP		THE BY
(Name o	f Corporation as currently filed with the Florida Dept. of State)	50%
P21000069657		100 B
,	(Document Number of Corporation (if known)	70, 0
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corporation adopts the fol	lowing amendmen
A. If amending name, enter the new na	me of the corporation:	
name must be distinguishable and contain "Inc.," or Co" or the designation "Co"chartered," "professional association,"	the word "corporation," "company," or "incorporated" or the abbreorp," "Inc," or "Co". A professional corporation name must corporation remains the abbreviation "P.A."	The new viation "Corp.," ontain the word
B. Enter new principal office address, in (Principal office address MUST BE A ST		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O	rable: PFFICE BOX)	
	-	
D. If amending the registered agent and new registered agent and/or the new	l/or registered office address in Florida, enter the name of the registered office address:	72-7
		7
new registered agent and/or the new		
new registered agent and/or the new	registered office address:	(Zip Code)

Signature of New Registered Agent, if changing

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 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	<u>Title</u>	Name	Address
(Check One) 1) Change	P	LEYVA, RICHEI A	1128 NW 7TH AVE UNIT 705 MIAML FL 33436
Add X Remove	P	VIVIAN GONZALEZ	
2) Change	<u></u>	- TVIAN GONZALEZ	12161 SW 152 ST
X Add			Msami 19 33177
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		.	
Add			
Remove			
6) Change			
Add			
Remove			

mending or adding additional Art ach additional sheets, if necessary).	(Be specific)				
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n amendment provides for an exc ovisions for implementing the ame	nange, reclassi	fication, or ca	ncellation of is	sued shares,	
(if not applicable, indicate N/A)	HUINCIN II HOL	Contained in	me amenumen	t itstii.	
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The date of each amendment(s) ado	ption:	5 20 2022		, if other than the
date this document was signed. Effective date if applicable:	05/20	0 2022 nan 90 days after amer	ndment file date)	
	·	, ,	•	
Note: If the date inserted in this blood document's effective date on the Depa			ing requirements, this date	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopt action was not required.	ed by the incorporators	s, or board of directors	without shareholder action	n and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		. The number of votes	s cast for the amendment(s))
☐ The amendment(s) was/were appromust be separately provided for ea				
"The number of votes east fo	r the amendment(s) wa	is/were sufficient for a	pproval	E 2022 MAY LLAHA
by	(voting group)		·"	HAY F
JANUARY 2		\wedge		TLED 26 PM SSEE F
DatedSignature	Viv	ran ponra	la	6: 15 STATE LORIDA
selected,		in the hands of a received	or officers have not been iver, trustee, or other court	
_	(Typed or pri	nted name of person,s	igning)	
_	(Title of person	on signing)		