P21000070790

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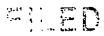
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LOS SEBASTIAN	ES CATERING INC	
DOCUMENT NUM	BER: <u>P21000070790</u>		.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JUAN A. ABRAHAM HERI	NANDEZ Name of Contact Persor	
		Name of Confact Persor	ı
		Firm/ Company	***
	13990 VERONICA ST		
Address			
	WELLINGTON, FL 33414		
		City/ State and Zip Code	
	AMERICATAX0109@HOT E-mail address: (to be us	MAIL.COM sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
SANDRA L MONCA	NDA) 506-6766
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 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)
Am Div P.O	ching Address endment Section dision of Corporations disposed Box 6327 ahassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



LOS SEBASTIANES CATERING INC	
(Name of Corporation as currently	filed with the Florida Dept. of State) 7: 44
	2021 AGO GO ARI 1 4 4
P21000070790	C
(Document Number of	Corporation (if known) ALLES UP STATE ALLES ALE ALEE ALEE FL
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
A. If amending name, enter the new name of the corporation.	
	The
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," 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 addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	<u> </u>
(Florida stre	et address)
New Registered Office Address:	, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
Vig	o o o o
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 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>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	JESSICA J ABRAHAM HERNAND	13990 VERONICA CT
Add			WELLINGTON, FL 33414
X Remove			
2) Change	VP	JESSICA J ABRAHAM ZUNIGA	13990 VERONICA CT
X Add			WELLINGTON, FL 33414
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if	ditional Articles, enter cl necessary). (Be specific	c)		
		<u> </u>		
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If an amendment provides provisions for implement	for an exchange, reclas	sification, or cancellation	of issued shares, ment itself:	
(if not applicable, indic	cate N/A)	te contained in the amend	ment tigetti	
,				
			-	- -

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
tno more than 90 days o	ifter amendment file date)
Note: If the date inserted in this block does not meet the applicable stadocument's effective date on the Department of State's records.	nutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board o action was not required.	directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	er of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vermust be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were suffice	cient for approval
by	
(voting group)	
Dated 08/25/2021	
Signature TUAN, ABRAHAM	
(By a director, president or other officer – if a selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
JUAN A. ABRAHAM HERNANDE	
(Typed or printed name of	person signing)
PRESIDENT	
(Title of person signing)	