P21000084684

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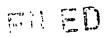
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:REY DE	EREYES DEL MAR INC					
DOCUMENT NUMBER: P21000084684						
The enclosed Articles of Amendment and fee a	are submitted for filing.					
Please return all correspondence concerning th	is matter to the following:					
	FELIPE CABANAS LOPEZ					
	Name of Contact Person					
	Firm/ Company					
	12161 SW 192ND TER					
	Address					
	MIAMI, FL33177					
	City/ State and Zip Code					
	FELIPITOL38@GMAIL.COM					
E-mail address: (to	be used for future annual report notification)					
For further information concerning this matter,	please call:					
FELIPE CABANAS LOPEZ	at (786) 647-0370					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:					
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State						
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



REY DE REYES DEL MAR INC

CABANAS SEA PRODUCTS INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab	OF STATE
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the its Articles of Incorporation: A. If amending name, enter the new name of the corporation: CABANAS SEA PRODUCTS INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the above the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "company," or "incorporated" or the second contain the word "corporation," "corporation," or "incorporated" or the second contain the word "corporation," "corporation," or "i	OF STATE
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name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab	
CABANAS SEA PRODUCTS INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab	
	The new
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mus "chartered," "professional association," or the abbreviation "P.A."	bbreviation "Corp.,"
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	<u>:</u>
(Florida street address)	
New Registered Office Address:, Florida	Zip Code)
	(ny santy
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 p	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.

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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.

Example: \underline{X} Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Salty Smith	
Type of Action (Check One)	<u>Title</u>	. <u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
.5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach ad	ing or adding addiditional sheets, if n	ecessary), (Be	specific)				
	 						
							
							
If an any	andmont requides	for an avalous	waalaasittaati	an an annaillata	ion of ingred th	NAMOS	
nrovisio	endment provides ons for implementi	nor an exchange	, rectassification	ined in the am	endment itself:	iai es,	
(if n	ot applicable, indic	ate N/A)					
							
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			-				
							

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	adoption:	, if other than the
date this document was signed,		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment)	
	(no more than 90 days after amendment)	file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requestrement of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors withou	it shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east fo sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The or each voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	l
by	(voting group)	.
	(voting group)	
Signature	101/2021 M	
selec	director, president or other officer – if directors or office ted, by an incorporator – if in the hands of a receiver, tru nted fiduciary by that fiduciary)	
	FELIPE CABANAS LOPEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	