## P22000008976

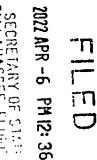
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name	)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
	J. HORNE	
	APR 2 5 2022	•

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: PUPUSERIA LAS	DELICIAS RESTAURAN	TT INC				
	UMBER:P22000008976						
The enclosed Arti	icles of Amendment and fee are su	bmitted for filing.					
Please return all c	orrespondence concerning this ma	tter to the following:					
	SANDRA Y LOPEZ FLORE	ES					
		Name of Contact Persor	1				
	PUPUSERIA LAS DELICIA	S RESTAURANT INC					
		Firm/ Company	<del>-</del>				
	758 SW AVENS ST						
		Address					
	PORT ST LUCIE FL 34983						
		City/ State and Zip Code					
	sandra198951@yahoo.com						
	<del>-</del> -	sed for future annual report	notification)				
For further inforn	nation concerning this matter, pleas	se call;					
SANDRA Y LO	PEZ FLORES	at ( 772	_) 812-6220				
N:	ame of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:				
S35 Filing Fe	ee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
	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 Articles of Incorporation

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TOTOSERM ISTO MEDICINO RESTROMINT INC		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	35%
P22000008976		SEX T
(Document Number	of Corporation (if known)	
		- S
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Floridu Profit Corporation adopts the fo	illowing amentiquent(
A. If amending name, enter the new name of the corporation:		
N/A		iee.
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must	The new reviation "Corp.," contain the word
D. Passa and action of the continue of an extraction of the continue of the co	N/A	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
(Studing dualess SIAT BLATOST OFFICE DOX)		<del></del>
	<del></del>	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre		
	:58;	
Name of New Registered Agent N/A	<del></del>	
tFlorida (	street address)	
Van Baristand Office Address	. Florida	
New Registered Office Address:	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the po	sition.
C:	Dinietowal Count if chamber	
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)

Example:

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 (Check One)	<u>Title</u>	<u>N'ame</u>	<u>Addres</u> s
1) Change	VP	TERESA D RAMIREZ FLOREZ	758 SW AVENS ST
Add		-	PORT ST LUCIE
X Remove			FL 34983
2) Change	VP	ORLANDO REINA RODES	758 SW AVENS ST
X Add			PORT ST LUCIE
Remove 3 ) Change			FL 34983
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attac	ending or adding additional Artic h additional sheets, if necessary).	(Be specific)	e(s) here:				
N/A	· · · · · · · · · · · · · · · · · · ·						
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F. <u>If an</u>	amendment provides for an exch	nange, reclassifica	<u>tion, or cancellat</u>	tion of issued s	hares,		
pro	visions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the am	endment itself	<u>:</u>		
N/A	уу нөл аррисаоле, таксас голгу						
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The date of each amendment(s) a	ioption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amifficient for approval.	endment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	ng statement nt(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
03/21/2023 Dated		
Signature	andra lopen	
(Hy-tr)	irector, president of other officer - if directors or officers have d, by an incorporator - if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)	
	SANDRA Y LOPEZ FLOREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	