2/24/22, 1:22 PM

Division of Corporations

# Elorida Department of State

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(((H22000072278 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TILLETT ALVARADO & PRENDERGAST

Account Number : I20210000002 : (561)345-2416 Fax Number : (561)907-4965

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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### COR AMND/RESTATE/CORRECT OR O/D RESIGN CHARRITO LOKO TAQUERIA, INC.

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#### **COVER LETTER**

TO: Amendment Se Division of Cor			
NAME OF CORPO	ORATION: CHARRITO LOK	O TAQUERIA, INC.	
DOCUMENT NUM	1BER: P22000011641		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	JENNIFER DIAZ		
		Name of Contact Person	n
	CHARRITO LOKO TAQUE	ERIA, INC.	
	···	Firm/ Company	
	1649 S.W. 6TH DRIVE		
		Address	
	POMPANO BEACH, FL 336	060	
		City/ State and Zip Cod	e
	ROSALIONICASIO@HOTI	MAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
JENNIFER DIAZ		at (	657-1801
Nume	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Dep	urtment of State:
□ \$35 Filing Fee	S43.75 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)
<u>M:</u>	ailing Address	Street	Address

Amendment Section

Division of Corporations
The Centre of Tallahassee

Amendment Section

P.O. Box 6327

Division of Corporations

#### Articles of Amendment to Articles of Incorporation of

\ <u></u>		rida Dept. of State)	
222000011641			
(Document N	umber of Corporation (if kn	own)	
ursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation:	tes, this Florida Profit Corp	poration adopts the fo	llowing amendment
If amending name, enter the new name of the corpora	ation:		
ame must be distinguishable and contain the word "corpora Inc.," or Co.," or the designation "Corp," "Inc," or " chartered," "professional association," or the abbreviation	'Co". A professional corp		
Enter new principal office address, if applicable:	<u> </u>		
Principal office address <u>MUST BE A STREET ADDRESS</u>	Σ)		203
			= R3
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			· · · 5
		·	· ·
		<del></del>	<del></del>
	<del></del>	<del></del>	<del></del>
. If amending the registered agent and/or registered of		er the name of the	
new registered agent and/or the new registered office	address:		
Name of New Registered Agent		,	
Œ	lorida street address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
	•		,
iew Registered Agent's Signature, if changing Registered			
hereby accept the appointment as registered agent. I am for	amiliar with and accept the	obligations of the pos	ition.

☐ 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 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: XChange	<u>PT</u>	John Do	<u>ĸ</u>		<u>1922 F</u>
X Remove	<u>v</u>	Mike Jo	nes		μ. Ε.
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	• •	72
Type of Action (Check One)	Title		Name	Address	
1) Change	D	_	ROSALIO NICASIO	1649 S.W. 6TH DRIVE	 O
X Add				POMPANO BEACH, FL 330	)60
Remove					
2) Change		_			
Add					
Remove 3) Change					
Add					
Remove				<u>.                                    </u>	
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add			<del></del>		
Remove					

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amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary), (Be specific)	
	<del></del>
	<del></del>
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	2022 *- <u>21</u>
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	7:09
	1.8
	.;
an amendment provides for an exchange, reclassification, or cancellation of issued sh	on ares
rovisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:
Effective date if applicable:
Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by'"
by"  (voting group)
Dated
(By a director president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
JENNIFER DIAZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)