Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H24000233844 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

ACCOUNT Name : TAX TRAINERS INTERNATIONAL CONSULTANTS LLC

Account Number : 120210000123 Phone : (321)315-9576 ; (321)234-0285 Fax Number

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

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN **504 RESTAURANT BAR INC**

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Page Count	05
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: 504 RESTA	URANT BAR INC					
DOCUMENT NUMBER: P22000032723						
The enclosed Articles of Amendment and fee	are submitted for filing.					
Please return all correspondence concerning to	his matter to the following:					
MIGUEL I ROMER N	MENDOZA					
	Name of Contact Perso	n				
TAX TRAINERS INT	ERNATIONAL CONSULTANT	'S LLC				
	Firm/ Company					
3585 GRANDE RESE	RVE WAY APT 209					
	Address					
ORIALDNO FL 3283	7					
	City/ State and Zip Cod	e				
DOCS@TAXTRAINE	ERSINTL.COM					
E-mail address: (to	o be used for future annual report	notification)				
For further information concerning this matter	r, please call:					
MIGUEL J ROMER MENDOZA	at (321) 315-9576 de & Daytime Telephone Number				
Name of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 Filing Fee ■\$43.75 Filing Fe Certificate of Sta	——————————————————————————————————————	S52.50 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	Amen Divisi The C 2415	Address dment Section on of Corporations dentre of Tellahassee N. Monroe Street, Suite 810 assee, FL 32303				

FILED

Articles of Amendment ťΰ Articles of Incorporation af

2024 JUL 10 AM 10: 01

TATT NO VOLY LT STATE

504 RESTAURANT BAR INC	TALLAHASSEE, FLORIDA
(Name)	of Curporation as currently filed with the Florida Dept. of State)
P22000032723	
	(Document Number of Corporation (if known)
	.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s)
its Articles of Incorporation:	
A. If amending name, enter the new n	ame of the corporation:
	Tike new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Containered," "professional association,"	the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "forp." "Inc," or "Co". A professional corporation name must contain the word
B. Enter new principal office address,	if applicable:
(Principal office address MUST BE A S	
C. Enter new mailing address, if appl	inable:
(Mailing address MAY BE A POST	
<u> </u>	
D. If a mending the registered agent up	nd/or registered office address in Florida, enter the name of the
new registered agent and/or the ne	w registered office address:
V CN Barbar I to-	TAX TRAINERS INTERNATIONAL CONSULTANTS LLC
Name of New Registered Agent	ASSESSED AND PRESENTED WAY ADDITION
	3585GRANDE RESERVE WAY APT 209
	(Florida street address)
New Registered Office Address:	
	(Lip Codes
New Registered Agent's Signature, if c	insuring Registered Agent: urred agent. I am familiar with and accept the obligations of the position
The by decope me approximent as region	
والمراحات والمراجع وا	Signature of New Registered Agent, if changing
Check if applicable	637.070.111.62.55
☐ The amendment(s) is/are being filed p	oursuant to \$. 607.0 920 (11) (c). 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= Trustec; 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 Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Salty Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u> P</u>	EFREN S MERCADO	4006 S SEMORAN BLVD
Add			ORLANDO FL 32822
X Remove			
2) Сhange	AM	ALFONSO MACHUCA RUEDA	4006 S SEMORAN HLVD
X Add		* ± *	ORLANDO FL 32822
Remove	MGR	,	4006 S SEMORAN BLVD ORLANDO FL 32822
3) Change Add		<u> </u>	OKLANIJO TE 32022
Кетюус			
4) Change		· ————————————————————————————————————	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

THE NEW OF	WNERS NEED THOSE CHANGES TO MOVE FORWARD WITH ALL REQUIRED PAPERWORK SO
SEND THIS C	ZIANGES THROUGH PREPAID SUNBIZ ACCOUNT IS BETTER TO GET THIS DONE
	
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F. <u>If an amen</u>	dment provides for an exchange, reclassification, or concellation of issued shares, a for implementing the amendment if not contained in the amendment itself:
(if not	applicable, indicate N/A)
· <u>-</u>	
	

1994	06/01/2024	15 1 1
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		Allows of Michigan cont
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory tiling requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and	shareholder
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.	207
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	TILTU MO: 0
"The number of votes cast	for the amendment(s) was/were sufficient for approval	5 T
hy	(voting group)	15 3 C
07:09:202- Dated	livectors president or other officer - if directors or officers have not been	ORIUDA
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
	ALFONSO MACHUCA RUEDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	**************************************