P22000058727

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DIVISION OF CORPORATIONS

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COVER LETTERY

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CHICA	NOS INC
DOCUMENT NUMBER: P2200005873	
The enclosed Articles of Amendment and	
Please return all correspondence concerni	ng this matter to the following:
WIZETH STECCO	ІЙС
	Name of Contact Person
STECCONI'S TAX	SERVICES & MORE LLC
	Firm/ Company
1100 TAMIAMI T	• •
	Address
VENICE, FL 3428	5
	City/ State and Zip Code
HELPINGSWFL@	GMAIL.COM
E-mail addres	s: (to be used for future annual report notification)
For further information concerning this m	atter, please call:
WIZETH STECCONI	at (941) 525-3441 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Certificate o	
Mailing Address Amendment Section Division of Corporation 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

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Dept. of State)	1.4.03

CHICANOS INC (Name of Corporation as currently filed with the Florida I P22000058727 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 _ (Florida street address) _, Florida_ New Registered Office Address: (Zip Code) (City) 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 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.

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)

____ Remove

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 PT John Doe X Remove <u>v</u> Mike Jones X Add SV Sally Smith Type of Action Title Address 5 Name (Check One) DANA CARARO LOPEZ RODRIGI 1185 US HIGHWAY 41 1) ____ Change **BYPASS SOUTH** Add VENICE, FL 34285 ___ Remove 2) ____ Change ____ Add Remove __ Change ____ Add __ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change ___ Add Remove 6) ____ Change ____ Add

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

. .

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will 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 sharehole	der action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amer afficient for approval.	dment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	, , ,	
	(voting group)	
Dated 1/ g	3/23 /b-z-	
selecte	irector, president or other officer — if directors or officers have no d, by an incorporator — if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary)	
	ISEL LOPEZ RODRIGUEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . .