Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

lo:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512000707 Phone : (305)803-2736 Fax Number : (305)646-1527

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

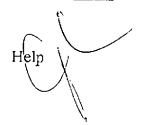
Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN TACOS EL TROMPO, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



-	Articles of Amendment			
	to			
Α.	rticles of Incorporation of			
TA	COS EL TROMPO, CORP.			
(Name of Corporation	n as currently filed with the I	Clorida Dept. of State)		
(Decume	nt Number of Corporation (if)	(nown)		
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Co	rporation adopts the follo	wing amendment(s	) to
A. If amending name, enter the new name of the cor	poration:			
			The new	
name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc." or chartered," "professional association," or the abbrevia	or "Ca" A professional cas	corporated" or the abbrevi rporation name must cor		
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDR	ESS)	<del></del>		
			<u> </u>	
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			75	1
MATERIAL STATES SALES SA			<u> </u>	
			22	
			39	
			<del></del>	
D. If amending the registered agent and/or registered	office address in Florida, en	ter the name of the		
new registered agent and/or the new registered off	ice address:			
Name of New Registered Agent				
			<del></del>	
	(Florida street address)			
New Registered Office Address:	,			
Hew Registered Office Madress.	(City)	, Florida	p Code)	
	(14.77)	121	p Coaej	
New Registered Agent's Signature, if changing Registe	ered Agent:			
I hereby accept the appointment as registered agent. I am	n familiar with and accept the	obligations of the position	1.	
<u> </u>				
Signature	e of New Registered Agent, if c	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)

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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u> <u>Joh</u>	<u>in Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
<u>X</u> Add	SV S <u>al</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	ADRIAN CARRILLO JR.	1275 SW 24 AVE
X Add			APT #2
Remove			FORT LAUDERDALE FL. 33312
2) Change			25 -
Add			3 P
Remove 3 ) Change			PM 12: 39
Add			<u> </u>
Remove			
4)Change			
Add			
Remove			
5)Change			
Add			
Remove			
① Change		·	
Add			
Remove			



Attach additional sheets, if necessary). (Be specific)  an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
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(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:
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
(voting group)
O8/24/2023 Dated Signature Dealls
Signature Dulla 39
(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)
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)