P24000053399

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· ——
Special Instructions to Filing Officer:

Office Use Only



900437402259

120 1 14 1 15 7 7 7 7 7 7 7 7

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: JASMIN	Comida Ce	ntro America	na I	nc
DOCUMENT NUMB		053399			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	Angle Fran	Name of Contact Person	<u>. </u>	_	
	· •	Firm/ Company		_	
	3813 NW 5	4+nst			
	Ft Lauderd	ale FL 3	3309		
		City/ State and Zip Code			
	Angle Varman E-mail address: (to be us	do 1990 & ed for future annual report	hymail. com		
For further information	n concerning this matter, pleas	se call:			
Angie Piame o	mirez of Contact Person	at (<u>954</u> Area Coo	851 - 3348 de & Daytime Telephone Num	ber	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	SECR TAL	2024 0

Street Address

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

Jasmin Comida Cento Americana (Name of Corporation as currently filed with the Florida Dept. of State) P2400005339 (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) New Registered Office Address: , Florida (City) (Zip Code) 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

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	$\overline{\text{pT}}$	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	٠.
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				SE (202
Remove				SECRUTALUA
6) Change		_		
Add				PA
				1.14

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
		
· · · · · · · · · · · · · · · · · · ·		
	_	
	_	
If 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)		
	···	_
	SECRE	100 1707
		2
	AH	-
	S S	-е
	ASSEE, FL	_=
	 カゴ	רה כי טפ
	- FA	0

The date of each amendment(s) adoption: September 23, 2024	, if other tha	in the
Effective date if applicable: 09/23/24 (no more than 90 days after amendment file date)		
(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 document's effective date on the Department of State's records.		is the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder	
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)		
(voting group)		
Signature (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)		
Angle Hamivez Typed or printed name of person signing)		
President (Title of person signing)	2024 OCT -8 PM 2: 06 SECRE JARRY OF STATE TALLAHASSEE, FL	
	LAE 06	