P92000008305

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Busi	ness Entity Nai	me)
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Special Instructions to Fi	ling Officer	
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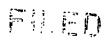
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	PRPORATION: MENES ENTERP	RISES, INC.	.
DOCUMENT	NUMBER: P92000008305		
	rticles of Amendment and fee are su	abmitted for filing.	
Please return all	l correspondence concerning this ma	atter to the following:	
	JOSEFINA MARTI		
		Name of Contact Person	n
	MENES ENTERPRISES, IN	C.	
		Firm/ Company	<u> </u>
	PO BOX 812394		
	Address		
	BOCA RATON, FL 33481		
		City/ State and Zip Cod	e
	josiemarti@gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further info	rmation concerning this matter, plea	se call:	562-9447
1	Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a ch	neck for the following amount made	payable to the Florida Depa	artment of State:
\$ 35 Filing 1	Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy
		enclosed)	is enclosed)

Articles of Amendment

to
Articles of Incorporation



MENES ENTERPRISES, INC.	2021 MAD 16 DM 6 50		
(Name of Corporation as curren	itly filed with the Florida Dept. of State		
P92000008305	SECRE (m) OF STATE		
(Document Number	of Corporation (if known) 1= SSEE, FL		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	1137 W 42nd St		
(Principal office address MUST BE A STREET ADDRESS)	Hialeah, FL 33012		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 812394		
(Maing address Mart 122711001011102 505)	Boca Raton, FL 33481		
D. If amending the registered agent and/or registered office ad			
new registered agent and/or the new registered office addre	<u>55.</u>		
Name of New Registered Agent			
(Florida s	street address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Ager	nt:		
hereby accept the appointment as registered agent. I am familian	m with and accept the obligations of the position.		
Cimana and Alima	Designated to antif changing		
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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Josefina Marti	PO Box 812394
Add			Boca Raton, FL 33481
Remove 2) Change	P	Josefina Marti	PO Box 812394
X Add			Boca Raton, FL 33481
Remove 3) Change	P	Julio A. Menes	PO Box 812394
Add			Boca Raton, FL 33481
X Remove 4) Change	VP	Julio A. Menes	PO Box 812394
X Add	-		Boca Raton, FL 33481
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)		
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		<u></u>	
 :			
If an amendment provides for an exch	anno reclassification or	cancallation of issued s	harne
provisions for implementing the ame	ndment if not contained in	the amendment itself	
(if not applicable, indicate N/A)			-
sefina Marti (P) will have 51 shares of the	r company		
serina Marti (1) will have 51 shares of the			
lio A. Menes (VP) will have 49 shares of	the company		
		 	<u> </u>
			· · · · · · · · · · · · · · · · · · ·

	06/30/2020	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
U Effective date <u>if applicable</u> :	6/30/2020	
Enective date in apparentie.	(no more than 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing require Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sh	archolder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the sufficient for approval.	e amendment(s)
	approved by the shareholders through voting groups. The foli for each voting group entitled to vote separately on the amend	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	<u>,,,</u>	
**/ <u></u>	(voting group)	
03/01/20 Dated	121	
sele	a director, president or other officer – if directors or officers heted, by an incorporator – if in the hands of a receiver, trustee ointed fiduciary by that fiduciary)	
	JOSEFINA MARTI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	