774H 000070245

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CORAL WAY RE	Y'S PIZZA, INC.						
DOCUMENT NUM	P94000070245							
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all corre	spondence concerning this ma	tter to the following:						
	Julio Gutierrez							
	Name of Contact Person							
	Law Office of Julio Gutierrez, P.A.							
	Firm/ Company							
	2464 SW 137 Avenue							
	Address							
	Miami, FL 33175							
		City/ State and Zip Code						
	julio@reypizza.com							
	E-mail address: (to be us	sed for future annual report	notification)					
For further information	n concerning this matter, pleas	se call:						
Julio Gutierrez		at (305	_) 325-8600					
Name	of Contact Person	Area Coo	de & Daytime Telephone Number					
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	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		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ussee, FL 32303					

Articles of Amendment to Articles of Incorporation

of

CORAL WAY REY'S PIZZA, INC.				SSET	<u>.</u>	In
(Name of Corpo	ration as currently	filed with the Florida Dept.	of State)		3	Ö
P94000070245				3.7		
(Do	ocument Number of	Corporation (if known)		18.55	ັ້ມ	
Pursuant to the provisions of section 607.1006. Flo its Articles of Incorporation:	orida Statutes, this F	<i>lorida Profit Corporation</i> ado	pts the follo	wing ame	ndmen	n(s) to
A. If amending name, enter the new name of th	ne corporation:					
					new	
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the al	Inc." or "Co". A					
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A						
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	(<u>BOX</u>)					
		<u> </u>				
D. If amending the registered agent and/or registered agent and/or the new register	istered office addre red office address:	ss in Florida, enter the name	of the			
Name of New Registered Agent						
	(Florida stree	t addesse)				
	77 107 100 100 517 60	· man · con				
New Registered Office Address:	((Cirv)	Florida <i>(</i> 2	Zip Code)		
		•	•	,		
New Registered Agent's Signature, if changing	Registered Agent:					
I hereby accept the appointment as registered age		th and accept the obligations	of the positio	on.		
c	Standards of Many De-	sistanad Agast If alianaises				
	ыдпаште ој меж кез	nistered 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	PT	<u>John Doe</u>	
X Remove	<u>V</u>	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	Р	Tania Noda	2480 SW 137 Avenue
X Add			Miami, FL 33175
Remove			
2) Change	V.l.	Niurka Fernandez	2480 SW 137 Avenue
X Add			Miami, FL 33175
Remove 3) Change	S	Julio Gutierrez	2464 SW 137 Avenue
X Add			Miami, FL 33175
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

,	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	· · · · · · · · · · · · · · · · · · ·
•-	to an analysis of the first of the control of the c
r.	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)
	(y nor apprecione, marciae (mar)
-	
-	
-	

	3/22/2022	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
3/2 Effective date <u>if applicable</u> :	2/2022	
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the aufficient for approval.	nmendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
3/22/2022 Dated	Prel	
	mu arinaclas	
Signature		
selecte	irector, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, of ted fiduciary by that fiduciary)	
	Margarita Rodriguez	
	(Typed or printed name of person signing)	
	Secretary	

(Title of person signing)