## P95000037947

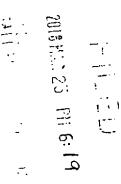
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: EL JARDIN SUPI	ERMARKET INC	
	ER:P95000037947		<del></del>
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
		JOSE C ORTEGA	
-		Name of Contact Person	n
	EL JARDIN SUPERMARKET INC		
_	Firm/ Company		
	;	12551 W OKECHOBEE R	D
<del>-</del>		Address	
	HL	ALEAH GARDENS, FL 3.	3016
_		City/ State and Zip Cod	e
ortega	ose02@yahoo.com		
		sed for future annual report	notification)
Par farther information	concerning this matter, pleas	an calls	
ror further information	concerning this matter, pieas	se can.	
JOSE C ORTEGA		at (	9625675
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## EL JARDIN SUPERMARKET INC

(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P95000037947	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	·
C. Enter new mailing address, if applicable:	10 T
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	. <u> </u>
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 ad-	
Name of New Registered Agent	
(Flori	da street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
Signature of N	New Registered Agent, if changing

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 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	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Tide</u>	<u>Name</u>	<u>Addres</u> s
1) Change	secretary	ALEXIS CARBAJO	12551 W OKEECHOBEE RD
Add	<del></del>		HIALEAH GARDENS FL 33016
X Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			<u></u>
Remove			
6) Change			
Add			
Remove			

Attach (	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). Be specific
	<del>.</del>
If an ar	nendment provides for an exchange, reclassification, or cancellation of issued shares, tons for implementing the amendment if not contained in the amendment itself:
<u>provis</u>	not applicable, indicate N/A)

The date of each amendment(s) ac date this document was signed.	option:	, if other than the
C		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	, , , , , , , , , , , , , , , ,	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dipartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment flicient for approval.	(s)
	roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	veni
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(yoting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
03/21/2019 Dated		
Signature ( /	Jose P Out 1 G	
(B) a d selected	rector, president or other officer – if firectors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other couled fiduciary by that fiduciary)	
	JOSE C ORTEGA	
	(Typed or printed name of person signing)	
	PTS	
	(Title of person signing)	

. . . .