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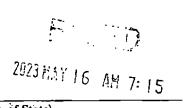
TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: RAMA OF MIAM	II, INC.	
DOCUMENT NUM	PASOOOAAASA		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Julio Gutierrez		
		Name of Contact Person	1
	Law Office of Julio Gutierre	z, P.A.	
		Firm/ Company	
	2464 SW 137 Avenue		
		Address	
	Miami, FL 33175		
		City/ State and Zip Code	2
	julio@reypizza.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, plea	se cail:	
Julio Gutierrez		at (305	325-8600
Name	Name of Contact Person at (305) 325-8600 Area Code & Daytime Telephone Number		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	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 8Tallahassee, FL 32303		ment Section In of Corporations In the control of Tallahassee In Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation of



RAMA OF MIAMI, INC.

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P95000040854	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida ts Articles of Incorporation;	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:
	The new
	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADD</u>	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
 If amending the registered agent and/or register new registered agent and/or the new registered of 	
Name of New Registered Agent	
The state of the s	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	victored Agents
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Signo	ature 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	P	Ramon Rodriguez, Jr.	2480 SW 137 Avenue
X Add			Miami, FL 33175
Remove			
2) XX Change	P	Margarita Rodriguez	2480 SW 137 Avenue
<u>A</u> dd			Miami, FL 33175
Remove 3)Change	VP,S	Margarita Rodriguez	2480 SW137 Avenue
_X X dd			Miami, FL 33175
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
-	
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(1) 10. 17.	
(g spp	
()	

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	05/03/2023	
The date of each amendment(s) a ate this document was signed.	doption:	, if other than the
•	03/2023	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, tepartment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholde	er 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 amend ufficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following steach voting group entitled to vote separately on the amendment(s)	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	,,,	
	(voting group)	
0.5/0.2/202	2	
05/03/202 Dated	·	
Signature	y and Roll	
selecte	frector, desident or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	
	Margarita Rodriguez	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	