PO4000035701

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: La Abunda		ombiana, Inc.
DOCUMENT NUMBER: P0400003570	11	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Ricardo L. Carmo	ona	
	Name of Contact Person	
The Carmona La	w Firm, P.A.	
	Firm/ Company	
465 S. Orlando A	ve, Ste 204	
	Address	
Maitland, FL 327	51	
	City/ State and Zip Code	
gabydominos@hotm	ail.com	
• • •	sed for future annual report i	notification)
For further information concerning this matter, pleas	se call:	
Ricardo L. Caramona	_{a1.} 407	_, <u>478-5970</u>
Name of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check for the following amount made [payable to the Florida Depar	tment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314	Amendr Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

La Abundancia Bakery (Colombiana, Inc.			
	s currently filed with the F	lorida Dept. of Stat	<u>e</u>)	
P04000035701				_
(Documei	nt Number of Corporation (i	t'known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corpo	oration adopts the following	ing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				7he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professiona		
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>				_
				_
C. Enter new mailing address, if appl				
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)			_
				_
D. If amending the registered agent an			r the name of the	
new registered agent and/or the new		_		
Name of New Registered Agent	Gabriela M. Gut	·		
	1555 State Roa		001	
		eet address)	22702	
New Registered Office Address:	Winter Park		Florida 32792 (Zip Code)	_
	(Ciţy)		(Σιρ Coue)	
New Registered Agent's Signature, if c	hanging Registered Agent:	<u> </u>		
I hereby accept the appointment as legi-	≱red agent Lam familiar v	vith and accept the o	bligations of the position.	
12	Nature of Vac Paristered	tout if abayaina		

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>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Р	Alzate, Milder	671 Post Oak Circle, #111
Add			Alt. Springs, FL 32701
Remove			
2) Change	<u>v</u>	Johnoson, Edmee	3469 Quail Ct
Add			Melbourne, FL 32935
Remove			
3) Change	P	Gutierrez, Francisco L.	4030 Coralbroke Grove
Add			Orlando, FL 32826
Remove			
4) Change	VSTD	Gutierrez, Gabriela M.	1555 State Road 436
√ Add			Ste 1001
Remove			Winter Park, FL 32792
5) Change			
Add			
Remove			
6) Change			
Remove			

amending or adding additional Attach additional sheets, if necessary)). (Be specific)
	
<u>.,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	——————————————————————————————————————
V., V.	
an amendment provides for an exprovisions for implementing the an (if not applicable, indicate N/A)	schange, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
<u></u>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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 east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4-14-2014	
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)	
Gabriela M. Gutierrez	
(Typed or printed name of person signing)	
Secretary	
(Title of person signing)	