414679

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SUNShine packaging Inc. DOCUMENT NUMBER: 414679						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Francisca E. Flores Name of Contact Person Sonshine packaging Inc Firm/Company						
Firm/ Company						
880 west 19th St Address						
Higlen, FL 33010						
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Daniel Ieyva at (305) 887-8141 Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to

Articles of Incorporation of Sunshine Packaging Inc.

Name of Corporation as currently filed with the Florida Dept. of State)

FILED

20H AUG 26 AM II: 43

EMARKET OF STATE

FALLAHASSEE, FLORID

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation			
ord "chartered," "professional association,"		•	
Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>			
	 		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)			
- (Maniling addrage MAV RR A PIN I IIII III	CE BOX)		
(mailing undress MAT BE ATOST OFFI			
(muning uturess <u>may be a 1051 0711)</u>		<u>.</u>	
If amending the registered agent and/or r	registered office address in Florida	enter the nam	e of the
	registered office address in Florida	, enter the nam	e of the
If amending the registered agent and/or r	registered office address in Florida istered office address:		e of the
If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Florida istered office address:		e of the
If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Florida istered office address:		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		Eva M. Flores-Monz	on 880 west 19th st
Add			Hialean, FL
Remove			33010
2) Change	PV	FRANCISTA E Flore	
Add			Hialean, FL
Remove			33010
3) Change		_	
Add			
Remove			6 v d 1 v d 10 - 10 A -
4) Change			
Adđ			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	Marie Company of the
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I an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	induction of not contained in the amendment reserr-
,	

date this document was signed.	prion:	, ii omer man m
Effective date if applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ited by the shareholders. The number of votes cast for the amendment(s) received for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	nted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated <u>8</u>	/21/14	
(By a di	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court	_
	ed fiduciary by that fiduciary)	
_	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
_	PESIDEUT (Title of person signing)	 .
	(Title of person signing)	