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(((H16000023671 3)))



H160000236713ABC-

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To:

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: (850)617-6380

From:

Account Name - : C T CORPORATION SYSTEM

Account Number : FCA000000023

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REGISTERED AGENT CHANGE J&J PRODUCE HOLDINGS, INC.

Certificate of Status	0
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COVER LETTER

Division	of Corporations				
J&J SUBJECT:	PRODUCE HOLDINGS, INC.				
	Name of C	orporation			
DOCUMENT N	F13000002110 NUMBER:				
The enclosed Sta	atement of Change of Registered Office	e/Agent and fee are submitted for filing.			
	correspondence concerning this matter				
	LAKRISHA DAVIS				
	Name of Co	ntact Person			
	CT CORPORATION SYSTEM				
	Firm/Co	ompany			
	208 SOUTH LASALLE ST SUITE 208				
	55A	ress			
	CHICAGO, ILLINOIS 60604				
	City/State a	nd Zip Code			
	E-mail address: (to be used for f	uture annual report notification)			
		•			
For further infor	mation concerning this matter, please	call:			
LAKRISHA DAV	vis	at ()			
<i>)</i>	Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$3	5.00 check made payable to the Depar	tment of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Amendment Section Division of Corporations	Amendment Section Division of Corporations			
	P.O. Box 6327	Clifton Building			
•	Tallahassee, FL 32314	2661 Executive Center Circle			
	•	Tallahassee, FL 32301			

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation or	0302, 607.1308, or 617.1308, Florida Statutes, this gamized under the laws of the State of
	the corporation: J&J PRODUCE HOLD	
	=	TT WHITNEY RD., LOXAHATCHEE, FL 33470
3. The mailing	address (if different):	
4. Date of incor	poration/qualification: 05/13/2013	Document number: F13000002110
	d street address of the current registere artment of State: (If resigned, enter resi	ed agent and registered office on file with the gned)
	ERNESTON, CHRIS, III	20
	4003 SEMINOLE PRATT WHITNEY	RD.
	LOXAHATCHEE, FL 33470	00 to 100 more to 100 t
6. The name an (if changed):		agent (if changed) and /or registered office U
	c/o C T Corporation System, 1200 Sout	h Pine Island Road NOT acceptable
	Plantation, Florida 33324	пот аксерного
_		eet address of the business office of its registered agent
		sted by its board of directors or by an officer so notified in writing of the change.
	al I hom.	Michael L. Crow / Assistant Secretary
-	are of an officer or director	Printed or typed name and title
agent. Or. is th	the appointment as registered agent to comply with the provisions of all si my duties, and I am familiar with an is document is being filed merely to r that the corporation has been notified	and ugree to act in this capacity. tatutes relative to the proper and complete d accept the obligation of my position as registered effect a change in the registered office address, I d in writing of this change.
By: (1) CT Cor	poration System	1-28-2016
-1. Anskard	mature of Registered Agent	Date
lf signing on be	chalf of an entity:	
	Asst. Secretary	
Ť	yped or Printed Name	

* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)