

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (B50)617-6380

From:

Account Name

: JOHN M WICKER PA

Account Number : I20070000104

Phone Fax Number : (239)939-2222 : (239)939-2280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

frans@lawcrw.com Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN IMMOKALEE PRODUCE SHIPPERS, INC.

	- 3-1-4
Certificate of Status	0
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Corporate Filing Menu

Help

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

(Florida street address)

(Civ)

Florida

(Zip Code)

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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:

239-939-2280

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>77</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<b>∡</b> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name.	Address
1) Change			
Add			eur.
Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			,
4) Change	<del></del>	· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	,		
Remove			

## COSTELLO ROYSTON&WIC

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		-			
n amendment o	rovides for an exc	hange, reclassi	fication, or cano	cliation of issue	d shares,
	rovides for an exclude the ame	endment if not	contained in the	amendment its	elf:
ovisions for imp	He, indicate N/A)				
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The date of each amendment(s) add	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ador by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amendment(s) fieient for approval.
The amendment(s) was/were appromist he separately provided for a	roved 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 f	or the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder
Dated 09/19/2	2012
Signature R	hard D Leine
selected	rector, president or other officer - if directors or officers have not been it, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	RICHARD LEVINE
	(Typed or printed name of person signing)
	PRESIDENT