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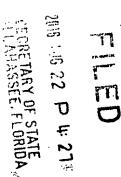
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: A quaharvest Seafood, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Argenis J. Contraras Name of Person
Agraharvest Seafood, LLC Firm/Company
12380 NW 116th Ave
Division of Corporations SUBJECT: A quality vest Seafood, LLC Name of Limited Liability Company The enclosed Articles of Amendment and fec(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Argen's J. Contracts Name of Person Aquaharvest Seafood, LLC Firm/Company 12380 NW III Ave Address Medfey, FL 33178 City/State and Zip Code QCD Donamar Corp. Com E-mail address: (to be used for future anhual report notification) For further information concerning this matter, please call: Argen's J. Contracts Area Code Daytime Telephone Number Enclosed is a check for the following amount: See \$25.00 Filing Fee \$25.00 Filing Fee & Certificat Copy (additional copy is enclosed)
·
Argenis J. Contreras at (305) 718 98 50 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Certificate of Status Certified Copy Certificate of Status &

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa) (A Florida Limited I.	ry as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L0900028932</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabil	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	12380 NW 116th Ave
(Principal office address MUST BE A STREET ADDRESS)	Medley, P2 33178
Y	
Enter new mailing address, if applicable:	12380 NW 116th Ave
(Mailing address MAY BE A POST OFFICE BOX)	Medly, 12 33178
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is
If Chan	ging Registered Agent, Signature of New Registered Agent
Page 1	

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VIA			Add
			□ Remove
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Note: docui	tive date, if other than the date of filing:	ed as the
Dated	108/16/2016	
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	Signature of a member or authorized representative of a member	
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	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00