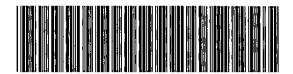
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COVER LETTER

TO:	Registration Se Division of Cor			
SUDIE	СТ:		& PRODUCE LLC	
SODJE	CI:		ited Liability Company	
			•	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
			JOSE R. ALVAREZ	
			Name of Person	
		J.C	C. CITRUS & PRODUCE LLC	
			Firm/Company	
		15618	3 SW 85TH. TERRACE # 125	
			Address	
			MIAMI, FL 33193	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report no	etification)
For furtl	her information c	oncerning this matter, please ca	all:	
	JOSE R. AL	VAREZ	786 315-6891	
	Name o	f Person		me Telephone Number
Enclose	d is a check for th	ne following amount:		
	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COUF Registration Sect Division of Corp Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Links	
(A Florid	ity Company as it now appears on our records.) la Limited Liability Company)
The Articles of Organization for this Limited Liability of Florida document number L09000094318	Company were filed on and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
N/A	
The new name must be distinguishable and contain the words "Li	nited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	15618 SW 85TH. TERRACE #125
(Principal office address MUST BE A STREET ADD	RESS) MIAMI, FL 33193
Enter new mailing address, if applicable:	15618 SW 85TH. TERRACE # 125
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33193
B. If amending the registered agent and/or reg	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	
B. If amending the registered agent and/or reg	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	dress here:
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: NAME OF NEW REGISTERED AGENT:	dress here: Enter Florida street address
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: N/A	Enter Florida street address , Florida
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: N/A	Enter Florida street address , Florida City Zip Code

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager uthorized Member	·	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
		 	☐ Change
			□ Add
		•	□ Remove
			☐ Change
			☐ Add
	•		Remove
			Change
			Remove 1
			□ Remove
			Change
			□ Add
			Remove

_□ Change

N/A		
,		
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ote: If the date inserted in this bloocument's effective date on the De	be specific and cannot be prior to date of filing or more that ck does not meet the applicable statutory filing requ	irements, this date will not be listed as
The 90th day after the reco		at 12.01 d.m. on the camer o
ted OCTOBER 23	, 2015	
	phernin	70 70
	Signature of simember or authorized representative of a m	nember 200 mar
	JOSE R. ALVAREZ	(0)
	Typed or printed name of signee	PH 2:

Filing Fee: \$25.00