

L12000019980

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H13000185306 3)))



H130001853063ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694.
Fax Number : (305) 633-9696

FILED
2013 AUG 20 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED
13 AUG 20 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GLOBAL TROPICAL FRUITS LLC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

05057

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 21 2013

J. BRYAN

H13000185306

4

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GLOBAL TROPICAL FRUITS LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2013 AUG 20 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/09/2012 and assigned
Florida document number L12000019980

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

JOSE E MEDINA MEJIA

New Registered Office Address:

900 NW 22 STREET

Enter Florida street address

MIAMI

Florida 33127

City

Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with
the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and
accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is
being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability
company has been notified in writing of this change.

Jose Elias Medina M.
If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

H13000185306

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	MARIA C MAGARINO	900 NW 22 STREET MIAMI FL 33127	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	MIGUEL A VILLAR	900 NW 22 STREET MIAMI FL 33127	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JOSE E MEDINA MEJIA	900 NW 22 STREET MIAMI FL 33127	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

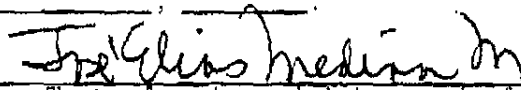
FILED
2013 AUG 20 AM 8:13
CLERK OF SUPERIOR COURT
JESSIE L. JORDAN

H13000185306

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
2013 AUG 20 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated _____



Signature of a member or authorized representative of a member

JOSE E MEDINA MEJIA

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

H13000185306