L13000 175701

	Requestor's Name)
(Address)
	Address)
	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	Business Entity Name)
(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



300337896833

13,116,119--31633--663 4495.00



O SIMMONS JAN 16 2020

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Giddings Berries USA, LC 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:
Edgar 2. Matta Name of Person
ERM Enveroses, Corp. 2500 SW 107 Ave. Suite # 8 Miami, FL 32165
City/State and Zip Code edgarmatta Dbelkouth -net E-med address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Edgar Watta at (305) 322-5740 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\Begin{array}{ c c c c c c c c c c c c c c c c c c c

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gida		
(<u>Name of the Limited</u> (A	I Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number		3 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	20191
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the attre	viation L.L.C."
Enter new principal offices address, if applicab	ole:	3 5
(Principal office address MUST BE A STREET	ADDRESS)	2 3 5
		3: 29
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the ce address here:	e name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	· · · · · · · · · · · · · · · · · · ·
	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 605, 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.

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager

AMBR = Authorized Member

<u>Title</u>	Name			<u>Address</u>					Type of Action
AMBR	Jorge	. Salman	Boghik	iau	Ave-	Del	Condor	# 55	Add
				0	Ficina	406			□ Remove
				Hu	echu	raba,	chile		Change
							<u> </u>		□ Add
								SECRETAR	_Remove
								ASSEE, FL	Phange Add Becmove
									_ Change
·								 -	_□ Add
									_□ Remove
									_□ Change
									_□ Add
									_□ Remove
					····			_	_□ Change
									_□ Add
									_□ Remove
									_🗆 Change

_	
_	
	۲۹ ۵۰
	SECRET ALL.
	DEC ALL
_	(A
_	
	71 29 FL
_	
_	
. —	
·.	
Effectiv	re date, if other than the date of filing: (optional)
fan effed Note: It	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
Jocumer	nt's effective date on the Department of State's records.
e reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
1116 5	total day after the record is med.
Jated	Dec. 9, 2019
Jateu	Dec. 9, 2019 Signature of a member or authorized epresentative of a member
	1 M
	Signature of a member or authorized epresentative of a member
	Signature of a member or authorized epresentative of a member Julio C. Giddings - Candia Typed or printed name of signee