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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HARDY SMOKED FISH US LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hardy Smoked Fish US LLC			
(<u>Name of the Limited Liability Compr</u> (A Florida Limited	ny as it now appears on out records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L16000102997	were filed on 05/25/16	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	if applicable: 7901 4th St N STE 300		
(Principal office address MUST BE A STREET ADDRESS)	address MUST BE A STREET ADDRESS) St. Petersburg, FL 33702		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office:	7901 4th St N STE 300 St. Petersburg, FL 33702 address on our records, enter the national states.	P 22 F 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
agent and/or the new registered office address here:	<u> </u>	PH 3:	
Name of New Registered Agent:		27	
New Registered Office Address:	Enter Florida street address		
	, Florida	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>	<u>Name</u>	Address	Type of Action
MGR_	Serz <u>eledo Carvalho, Bruno Ant</u> onio		□Add
		145 SW 13th St Miami FL 33130	∏Remove
			□Change
MGR_	Da <u>ms De Carvalho, Filipe</u>		🗆 Add
		145 SW 13th St Miami FL 33130	XìRemove
			Change
MGR	Serzeldo Carvalho, Bruno Antonio	7901 4th St N STE 300	X]Add
		St. Petersburg, FL 33702	□Remove
			□Change
MGR_	Dams De Carvalho, Filipe	7901 4th St N STE 300	
		St. Petersburg, FL 33702	□Remove
			□Change
			□Add
			Remove
			Change
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			□Remove
			[]Change

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an effective dai lote: If the da	te is listed, the date must bate inserted in this block	ate of filing: e specific and cannot be prior k does not meet the applicantment of State's records.	to date of filing or more that the statutory filing rec	(optional) nan 90 days after filing.) Pur- quirements, this date will	suant to 605,0207 (not be listed as t
record specifi l is filed.	ies a delayed effective c	late, but not an effective ti	me, at 12:01 a.m. on th	te earlier of: (b) The 90	th day after the
ated	02/22	2023	_ ·		
		2023			
	Si	gnature of a member or autho	prized representative of a	member	,,,,,,,
		Robin Jon	ed name of signee		

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