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(Re	questor's Name)	<u></u>
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eun ire	PANAMUS				
SUBJEC	1:		ited Liability Company		
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	•	
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		ANDRES HURTADO			
			Name of Person	 	
		PRODEZK INC			
			Firm/Company		
		848 BRICKELL AVE STI	E 950		
			Address		
		MIAMI, FL 33131			
			City/State and Zip Code		
		INFO@PRODEZK.COM			
		E-mail address: (to be used for future annual report noti	fication)	
For furthe	er information c	oncerning this matter, please c	all:		
ANDRES	SHURTADO		302 2048422 at ()		
	Name o	f Person		e Telephone Number	
Enclosed	is a check for th	ne following amount:			
≡ \$ 25.0	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)	
· -	Mailing Addres Registration S		Street Address: Registration Sec	ction	
1	Division of Corporations		Division of Cor	Division of Corporations	
	P.O. Box 632 Fallahassee, I		The Centre of T	`allahassee e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PANAMUSIC LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $^{09/13/2019}$ and assigned Florida document number 1.19000232371 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GUATEMALA FRUITS AND FOOD LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: New Registered Office Address: Enter Florida street address

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
			□Add
			□Remove
			□Change
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	PURCHASE SALE, IMPORT AND DISTRIBUTION OF FRUITS, VEGETABLES AND FOOD AS WELL AS
•	ANY ALL LAWFULL BUSINESS.
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an ef <u>(ote:</u>	tive date, if other than the date of filing:
record is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
ated	NOVEMBER 09TH 2031
ucu	

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Filing Fee: \$25.00

Typed or printed name of signee