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.

(((H15000300230 3)))



H150003002303ABCO

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

-			
	٠,	•	•

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : 120000000205 Phone

: (305)416-5800

Fax Number

: (305)416-6811

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

	Address:			
-maii	anaress:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN GREEN DISTRIBUTOR 211 INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

DEC 22 2019	
C LEWIS	3

Electronic Filing Menu

Corporate Filing Menu

Help

12/21/2015 12:23 3054166811

(((H150003002303)))

COVER LETTER

- . - . . . -

Division of Corp			·				
NAME OF CORPO	RATION: GREEN DISTRIE	UTOR 211 INC.					
DOCUMENT NUM	DOCUMENT NUMBER: P01000048507						
The enclosed Article	s of Amendment and fee are s	abmitted for filing.					
Please return all corre	espondence concerning this ma	atter to the following:					
	Diane M. Hernandez						
		Name of Contact Person	n				
	Adams Gallinar, P.A.						
		Firm/ Company					
	1000 Brickell Avenue, Suite	300					
		Address					
	Miami, Florida 33131						
		City/ State and Zip Code	e				
dher	nandez@agilaw.com						
-	E-mail address: (to be u	sed for future annual report	notification)				
For further information	on concerning this matter, plea	se call:					
Diane M. Hernandez		at (305	416-6800				
Name	of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:				
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Am Div P.C	filing Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301				

3054166811

ADAMS GALLINAR PA

SECULTA(((H15000300230 3)))

BIVINES OF CONFE AND SE

Articles of Amendment to Articles of Incorporation of

15 DEC 21 AM 10: 35

	GREEN DISTRIBU	JTOR 211 INC.	
(Name	of Corporation as currently	filed with the Florida I	Dept. of State)
P01000048507			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	Iorida Profit Corporatio	n adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corp	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST			
D. If amending the registered agent an new registered agent and/or the ne			name of the
Name of New Registered Agent	AGI Registered Agent, Inc.		
TVENTE OF THE PROSIDENCE PROSEN	1000 Brickell Avenue, Suite	e 300	
	(Florida stre	et address)	
New Registered Office Address:	Miami		, Florida
	(1)	City)	(Zip Code)
New Registered Agent's Signature, if c		SA . 2	a Ad ta
I hereby accept the appointment as regis.	tered agent. I am familiar w	th and accept the obliga.	tions of the position.
	Signature of New Re	vistered Agent if changi	no

Example:

3054166011

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Janes, V as Remove, and Sally Smith, SV as an Add.

X Change	PT 1	John Doe	
X Remove	Y 1	Mike Jones	
_X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	Adolfo Batista Llamas	455 Grand Bay Drive
Add			Suite 382
X Remove			Key Biscayne, FL 33149
2) Change	D/P/S/T	Alexandra Batista Llado	455 Grand Bay Drive
X Add			Suite 382
Remove			Key Biscayne, FL 33149
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove		•	
6) Change			
Add	_		
Remove			

PAGE 05/06 (((H15000300230 3)))

Attach additional she	ng additional Artic cets, if necessary).	(Be specific)			
					
				- -	
			······································	······································	
·					
					
			,		<u>, , , , , , , , , , , , , , , , , , , </u>
	<u> </u>	~ 			
					· · · · · · · · · · · · · · · · · · ·
					
					
	·				
			42		
f an amendment provisions for impl	ementing the amen	dment if not con	tained in the ame	on of Issued snare ndment itself:	<u>.s.</u>
(if not applicabl	le, indicate N/A)				
		- 			
					
	-				
					
		<u> </u>		·	

	40.00	3954166811	ADAMS GALLINAR PA	PAGE 06/06
12/21/2015 12:23		3634100011		(((H15000300230 3)))
The date of ea				, if other than the
Effective date	if applicab	le:		
			(no more than 90 days after amendment file date)	
		in this block does to on the Department of	not meet the applicable statutory filing requirements, this f State's records.	date will not be listed as the
Adoption of A	mendment	(s) (<u>CI</u>	HECK ONE)	
		were adopted by the s/were sufficient for	shareholders. The number of votes east for the amendment approval.	11(8)
			ne shareholders through voting groups. The following state g group entitled to vote separately on the amendment(s):	ment :
"The	number of v	otes cast for the ame	endment(s) was/were sufficient for approval	5
by _		(vo		居 流
		(vo	oting group)	N 1
	ment(s) was not required		board of directors without shareholder action and shareho	lder 🚆
	ment(s) was, not required		: incorporators without shareholder action and shareholder	15 DEC 21 AH 10: 35
	Dated	ecember 21, 2015		
	Signatur		(flusy	
		selected, by an inc	sident or other officer – if directors or officers have not bee corporator – if in the hands of a regeiver, trustee, or other cory by that fiduciary)	
		Robert R.	Adams, Esq.	
			(Typed or printed name of person signing)	
		Authorized	d Representative	
			(Title of person signing)	