(Requ	uestor's Name)	
(Addr	ess)	
(Addı	ess)	
(City/	State/Zip/Phone	· #)
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(Doc	ument Number)	·
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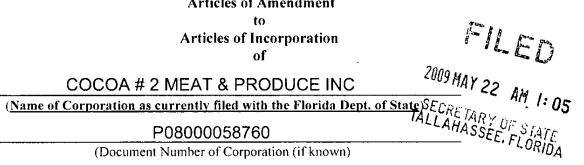
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	COCOA#2	MEAT & PRO	DUCE INC	
DOCUMENT NU	MBER:		P0800005876	50	
The enclosed Artic	les of Amendment and	fee are submitted	for filing.		
Please return all co	rrespondence concerning	ig this matter to th	ne following:		
	JULIO MOLINA				
		Name of Contac	t Person		
		JULIO MOLI	NA PA		
		Firm/ Comp	any		
	2002 CURRY FORD RD				
Address					
		ORLANDO FI	_ 32806		
City/ State and Zip Code				· · · · · · · · · · · · · · · · · · ·	
-	JULIOM(E-mail address: (to b	DLINA@BELLS be used for future and	OUTH.NET	n)	
For further informa	ation concerning this ma	itter, please call:			
J	ULIO MOLINA of Contact Person	at (407)	228-4757	
Name	of Contact Person	Α,	rea Code & Daytime	Telephone Number	
Enclosed is a check	for the following amou	ınt made payable	to the Florida De	partment of State:	
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certif	5 Filing Fee & ied Copy ional copy is enclosed	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ac Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center C	ircle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



following

ignation "Corp," "Inc,	"company," or "incorporated" or the "or "Co". A professional corporation the abbreviation "P.A."
<u>DDRESS</u>)	
(OA)	
tered office address in	Florida, enter the name of the
(Florida street ac	ddress)
	, Florida
(City)	(Zip Code)
egistered Agent: I am familiar with an	nd accept the obligations of the position
	d office address: (Florida street ad (City) egistered Agent:

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	ENRIQUE GUTIERREZ	400 S BURNETT RD COCOA FL 32926	□ Add □ □ Remove
<u>VP</u>	ANGEL JIMENEZ	3842 SHOREVIEW DR KISSIMMEE FL 34744	☑ Add □ Remove
	ding or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
	nendment provides for an exchange, r		
provision (if n	ons for implementing the amendment not applicable, indicate N/A)	if not contained in the amendmo	ent itself:
	1.4		

The date of each amendment	(s) adoption: <u>05-04-2009</u>
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
✓ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	5/4/09 Myslanes
Signature	Molane
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Mel, be Polanev (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)