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(Re	equestor's Name)	
(Ac	ddress)	_
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(Ci	ty/State/Zip/Phone	<i>⇒ #)</i>
PICK-UP	MAIT	MAIL
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SECRETARY OF STAFE FALLAHASSEE, FLORIC

Amend

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APR 1 2 2010

COVER LETTER

-TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION:	FloridaFresh Inc.	
DOCUMENT NU	MBER:		
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Thomas Sexauer	·
	r	Name of Contact Person	
	-	FloridaFresh Inc.	
		Firm/ Company	
	25	2nd St. N. Ste. 325D	
		Address	
		Petersburg, FL 33701	
	(City/ State and Zip Code	
	E-mail address: (to be use	Official of the second of the	
For further inform	ation concerning this matter,	, please call:	
	Tom Sexauer	at (727) 6: Area Code & Daytime Tel	37-6965
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amount r	made payable to the Florida Depar	tment of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A		Street Address Amendment Section	
Amendment Section Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

	Articles of Incorporation	2 1
	of	1000 1
FloridaFre	esh Marketing, Inc.	To Spin Top
(Name of Corporation as curr		Dent of State)
(Name of Corporation as Curre	catty fried with the Florida	Sept of State
(Document Nun	nber of Corporation (if know	Dept. of State) ARASA PARAMETERS vn)
resuant to the provisions of section 607.100 nendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation adopts the follo
. If amending name, enter the new name o	of the corporation:	
ame must be distinguishable and contain		The new
bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "problem Enter new principal office address, if app	ofessional association," or t	the abbreviation "P.A."
Principal office address <u>MUST BE A STREE</u>		
rincipal office address <u>MUST BE A STREE</u>		
rincipal office address MUST BE A STREE Enter new mailing address, if applicable	<u></u>	
rincipal office address <u>MUST BE A STREE</u>	<u></u>	
rincipal office address MUST BE A STREE	<u></u>	
Principal office address MUST BE A STREE	<u></u>	
rincipal office address <u>MUST BE A STREE</u> Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>	ET ADDRESS)	Florida, enter the name of the
rincipal office address <u>MUST BE A STREE</u> Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>	ET ADDRESS) ELECTION CONTROL	Florida, enter the name of the
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new regi	ET ADDRESS) ELECTION CONTROL	Florida, enter the name of the
rincipal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	ET ADDRESS) ELECTION CONTROL	Florida, enter the name of the
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Principal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new regi	ET ADDRESS) CE BOX registered office address in istered office address:	
Principal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new regi	ET ADDRESS) ELECTION CONTROL	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI If amending the registered agent and/or new registered agent and/or the new regi	ET ADDRESS) CE BOX registered office address in istered office address:	

Signature of New Registered Agent, if changing

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>	Name	Address	Type of Action
Preside	Jerry Gregg	25 2nd St. N. Ste 325D St. Petersburg, FL 33701	☐ Add ☐ Remove
President	Barbara Jacobsen	25 2nd St. N. Ste. 325 D St. Petersburg, Ft. 33701	☑ Add ☐ Remove
Vice P	Sonna Sexauer	25 2nd St. N. Ste. 325D St. Petersburg, FL 33701	☑ Add ☐ Remove
	g or adding additional Articles, enter of tional sheets, if necessary). (Be specifi		
provisions	ndment provides for an exchange, recla for implementing the amendment if n applicable, indicate N/A)		
			······································

The date of each amendment	t(s) adoption: March 26, 2010
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated Mar	ch 26, 2010
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
арр	onned inductary by that inductary)
	Thomas J. Sexauer
	(Typed or printed name of person signing)
	Vice President/CEO
	(Title of person signing)