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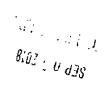
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LAMEX AGRIFO	ODS INC				
DOCUMENT NUMI						
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:	:			
	LISA HENKEL					
		Name of Contact	Person			
	LAMEX FOODS INC					
		Firm/ Compa	anv			
	8500 NORMANDALE LAKE BLVD, STE 1150					
		Address		.,		
	BLOOMINGTON MN 55437					
		City/ State and Z	ip Code			
A Z I I	.HENKEL@LAMEXFOODS	2113				
	E-mail address: (to be us		report	notification)		
	is man address, (to be a	sed for future timitar	геропп	inotification)		
For further information	n concerning this matter, pleas	se call:				
LISA HENKEL		952 at (		345-1964 _)		
Name (	Α	rea Coc	le & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florid	la Depai	rtment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copy enclosed)		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building				
Tall	ahassee, FL 32314		2661 E:	xecutive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LAMEX AGRIFOODS INC

				The state of the s
( <u>Name of Corpora</u>	tion as currently filed	with the Florida Dep	t. of State)	رنا 🗀
11000015919				
(Doc	ument Number of Corpo	aration (if known)	2019 AUG 216	
(DOC)	ament stamper of Corpe	nation (ii known)	2010 1100 20	- J. 33.
ursuant to the provisions of section 607.1006. Flori s Articles of Incorporation:	da Statutes, this <i>Florid</i> e	a Profit Corporation a	dopts the following IALLAHASSEE	jámendmeht(s : FLCRIDA)
. If amending name, enter the new name of the	corporation:			
				The new
ime must be distinguishable and contain the wo Corp.," "Inc.," or Co.," or the designation "Cor ord "chartered," "professional association," or th	p," "Inc," or "Co"	ompany," or "incorp A professional corpor	orated" or the abation name must c	breviation contain the
Enter new principal office address, if applicab	le:			
rincipal office address MUST BE A STREET AL				
···		· · · · · · · · · · · · · · · · · · ·		<u> </u>
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u>OX</u> )			
		<del></del>		<del></del>
If amending the registered agent and/or regist		Florida, enter the nai	me of the	
new registered agent and/or the new registere	o office address:			
Name of New Registered Agent				
	(Florida street addi			
	(1 107 144 37 66) 1744	(38)		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		_, Florida	
	(Ciţv)		(Zip C	ode)
ew Registered Agent's Signature, if changing Re	gistered Agent:			
hereby accept the appointment as registered agent.	I am familiar with an	d accept the obligation	is of the position.	
Sig	nature of New Register	ed Agent, if changing		
		and the second of the second second		

## 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 Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>J</u>	ohn Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		CHRISTIE HANCOCK	800 BRICKELL AVE
Add			SUITE 700
X Remove			MIAMI FL 33131
2) Change		LISA HENKEL	8500 NORMANDALE LK BVLD
X Add			SUITE 1150
Remove			BLOOMINGTON MN 55437
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

famending or adding additional Art Attach additional sheets, if necessary).				
		1. <u> </u>		
	.,			
f an amendment provides for an excl	hange reclassification	or cancellation of is	sued shares	
provisions for implementing the ame	endment if not containe	d in the amendment	itself:	
(if not applicable, indicate N/A)				
·	<del></del>			
	35-···		<del> </del>	
		<u>.</u>		
		<u> </u>		

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendr fficient for approval.	nent(s)
	roved by the shareholders through voting groups. The following st 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	<i></i>	
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and share	:holder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and sharehold	ler
AUGUST	5, 2019	
Dated	<del></del>	
Signature/	11_	
(By a d	irector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othe ted fiduciary by that fiduciary)	
	PAUL WALLACE	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	SECRETARY	
	(Title of person signing)	