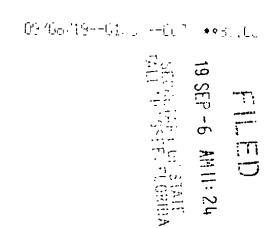
PII CCCC CH123

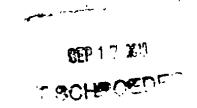
(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Vida Verde Farm	s.lnc.			
DOCUMENT NUMBE	D1100006/1123				
The enclosed Articles of	**************************************	bmitted for filing.			
Please return all corresp	ondence concerning this mat	tter to the following	ng:		
	Maria Del Pilar	Vila			
_		Name of Cont	act Persor)	
	Vida Verde Farms, Inc.				
_		Firm/ Con	npany		
	19901 SW 232nd St				
_	Address				
	Miami, FL 33170				
_		City/ State and	Zip Code	2	
maria	@vidaverdefarms.com				
	E-mail address: (to be us	sed for future anni	ial report	notification)	
	•		•		
For further information of	concerning this matter, pleas	se call:			
Maria Del Pilar Vila		at (305	969-1032	
Name of	Contact Person	,	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made p	payable to the Flo	rida Depa	rtment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Cop (Additional co- enclosed)	Dy	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of
Vida Verde Farms, Inc

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P11000064123	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	S
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	- <u> </u>
	## 24 F
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
Nume of New Registerea Agent	
(Florida s	treet address)
	·
New Registered Office Address:	, Florida (City) (Zip Code)
	(out)
New Registered Agent's Signature, if changing Registered Ager	
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
Signature of Nov.	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, a 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 = Continuous Continuous Continuous CEO = Continuous CE

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	_ <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>v</u>	Baudilio B. Vila	19901 SW 232nd St
Add _X Remove			Miami. FL 33170
2) Change	v	Christina M. Jones	19901 SW 232nd St
X Add			Miami, FL 33170
Remove 3) Change			(A) d. [
Add Remove			1 2 1 1 2 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add Remove			

<u>framending or adding additional Articles, enter change(s) here:</u> Attach additional sheets, if necessary). (Be specific)	
·····	-
<u> </u>	<u>.</u>
	
	-
	36 3
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	19 SEP
provisions for implementing the amendment if not contained in the amendment itself:	56 ÷ 1
(if not applicable, indicate N/A)	
	0 × ÷
	7

	08/29/2019	
The date of each amendment(s) a	doption:	, if other than
date this document was signed.		
	01/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	r
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u>,</u>	
-,	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	원 원 19
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	SEP TO
08/29	<i>2</i> 019	
Dated		ુંદ 🛬 🛅
Signature	Jan Lord	<u> </u>
	lirector, president or other officer - if directors or officers have not been	-
	d, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoin	ted fiduciary by that fiduciary)	
	Maria Del Pilar Vila	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

 $\mathfrak{a}\mathfrak{s}$