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AUG 0 6 2014 T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ROBERS	BERRIES AN	10 PRODUCE	_
DOCUMENT NUMB				_
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
	PANAMA CI Stre 4130	R ROBERT Name of Contact Person SERRIES A Firm/ Company Address TY BEACH City/ State and Zip Cod Sed for future annual report	NUE PRODUCE NUE FLORIDA E	
For further information	concerning this matter, pleas	se call:		
ROGE Name o	R ROBERT.	3 at (<u>850</u> Area Co	866-7951 de & Daytime Telephone N	or 850 -230-507
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	PD CK # 152
Mail	ing Address	Street	Address	

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

ROGERS BER	RIES SPRODUCE,	T $\iota\iota$) \subset
(Name of Corporation as currently filed wit		
		_
(Document Number of Corpor	ration (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	es, this Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporat	i <mark>ion:</mark>	
	HUSIASM, CO.	_The new
name must be distinguishable and contain the word "cor", "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	c," or "Co". A professional corporation name must	bbreviation contain the
	1 21.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) <u> </u>	•
	/V / H	-
		-
C. Enter new mailing address, if applicable:		<u>-</u> <u>-</u> <u>-</u> <u>-</u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		一章 学系
		- 🚝 📑
		- 13 기를
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		
Name of New Registered Agent	NIA	STAT
		or Smi
(Flo	orida street address)	
New Registered Office Address:	, Florida	_
	(City) (Zip Code)	-
		,
New Registered Agent's Signature, if changing Registered	l Agent:	
I hereby accept the appointment as registered agent. I am fa	amiliar with and accept the obligations of the position.	
Ciana (N. D.	NIX	
Signature of New Regi	istered 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)

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 s 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 Chang, 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	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change	- ,,_ .		
Add			
Remove			Υ
3) Change			A
Add		101	
4) Change	<u> </u>		
Add Remove			
5) Change			
Add Remove			
6) Change			
Add Remove			

tach additional sheets, if necessary).	(Be specific)
•	
	M
	(, V)
n amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
ovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	, I I V
	NH W
	() (' '

The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7-21-2014	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
ROGER ROBERTS	_
(Typed or printed name of person signing)	
DSVP	_
(Title of person signing)	