Florida Department of State

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(((H160001547053)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN LORIMIA FOOD CORP

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6/24/2016

FAX COVER SHEET

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FAXNUMBER	18506176380
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RE	(((H16000154705 3))) LORIMIA FOOD CORP - LZ#517601046

COVER MESSAGE

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COVER LETTER

Division of Cor			#436+1
NAME OF CORPO	RATION: LORIMIA FOOD	CORP	· · · · · · · · · · · · · · · · · · ·
	BER: P12000012206		
The enclosed Article	s of Amandmant and fee are su	boutted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
•	Cheysone Moseley		
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Cardenal is a cloud	for the fidhawing amount made ;	payable to the Florida Depa	riment of States
I I ANT PHING PLY	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Ā ይ የ	ailing Address mendment Section ivision of Corporations O. Dun 6327 tilehassee, FL 32314	Amend Divisio Clifton 2661 B	Address ment Section n of Corporations Duilding recentive Center Circle
	*	Tallaha	asee, FL 32301

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2016 JUN 24 AM 9: 18

Astuctes of Amendment to Articles of Incorporation of

LORIMIA FOOD CORP		
(Name o	f Corporation as currently f	iled with the Florida Dept. of State)
P12000019206		
	(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:	
		The new
"Corp.," "Inc.," or CO.," or the design word "chartered," "professional associal	ation "Corp," "Inc," or "Co tion," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the A."
B. Enter new principal office address, it applicable: (Principal office address MUST BE A STREET ADDRESS)		141 su 24th road Miani, Fl. 33129
C. Enter new mailing address. If appli (Mailing address MAYDE A POST)	cable: <u>OFFIBE DOX</u>)	141 en 24thread. Miami, PL. 33129
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address;	s in Florida, anter the name of the
Name of New Registered Agent	Richard Prieto	
	141 SW 24th Rd	
	(Florida stree	t address)
New Registered Office Address.	Miami	Florids 33129
	(0	(Zip Coda)
New Registered Agent's Signature, if continue of the suppointment as registered the suppointment as registered to the supposite to the supposi	hanging Registered Agent: tered agent am familiar wit	th and accept the obligations of the position.
	Signature of New Res	nistered Agent, if changing

It australing the Officers and/or Directors, enter the this and many of each officerAll ector being removed and title, norm, 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 teaves the mangaration, hally simila to 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:

₹ come	ET 194	in Doe		
X Remove	<u>y Mi</u>	ke Iones		
_X Add	SY Sal	llv Smith		
Type of Action (Check One)	Title	Name	Address	
1)Change	P	Giancarlo Buontempo	212 NE 65th	
Add			Miami, FL 33138	
X Remove				_
2)Change	P	Richard Prieto	141 SW 24th Rd	
X Add		,	Miami, FL 33129	_
Remyve				-
3)Change				•
Add				
Remove				
4)Change				_
Add				
Romove				-
5) Change				-
Askl				
Remove				-
6) Change				
Add				
Remove				

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FILED SECRETARY OF STATE JIVISION OF CORPORATION:

The date of each amendment(s) adoptio	n:	2016 JUN 24	AM 9: 18	if other than the
Effective date if applicable:	(no more than 90	days after amendment file	s date)	
Note. If the date instated in this block is document's effective date on the Department	lues and award the applicat ent of State's records.	ble statisticsy filing require	omouto, this date wil	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The aroundment(s) was/were adopted to by the shareholders was/were sufficient	ry the sharebolders. The r t for approval.	number of votes cast for th	e amendment(s)	
☐ The amendment(s) was/were approved must be separately provided for each	by the startholders throu voting group entitled to va	gh voting groups. The for the separately on the ame	llowing statement ndment(s):	
"The number of votes cast for the	e amendment(s) was/were	sufficient for approval		
by		P9		
	(voting group)			
The amendment(s) was/were adopted by action was not required.	y the board of directors w	ithout shareholder action	and shareholder	
The amendment(s) waz/were adopted be action was not required.	y the incorporators without	ut sharsholder ection and	shareholder	
Dated 6 25	2/16			
	DE			
Signature	president or total office	- if directors or officens	have not been	_
selected, by a	n incorporator - if in the l	ands of a receiver, trustee		
appointed fid	uciery by that fiduciary)			
Rich#	nd Prieto K			
	(Typed or printed us	me of person signing)		
Parah	tras			•
	CTiela of	nervon signing)		· · · · · · · · · · · · · · · · · · ·