P13000059131

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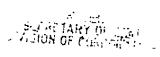
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AMIGO HARVES	TING INC.
DOCUMENT NUMBER: P13000059131	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
MANUEL A RUIZ	
	Name of Contact Person
AMIGO HARVESTING INC	<u>.</u>
	Firm/ Company
3458 NW 31ST AVE	
	Address
OKEECHOBEE, FL 34972	
	City/ State and Zip Code
E-mail address: (to be us	sed for future annual report notification)
	•
For further information concerning this matter, pleas	se call:
MANUEL A RUIZ	863 634-8137
Name of Contact Person	at (863) 634-8137 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy (Additional copy is enclosed) □S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Aniendment 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 Inc



A	Articles of Incorporation	2017 JUL 26 AM 9: 29
HMia	a Hurilanti	JUL 20 AM 3: 29
7 / / / 9	U MAI VESTING	NC
(Name of Co	rporation as currently filed with the Fl	orida Dept. of State)
	_ P/3000059/	<u>'3/</u>
	(Document Number of Corporation (if kn	lown)
Pursuant to the provisions of section 607,1006 ts Articles of Incorporation:	, Florida Statutes, this <i>Florida Profit Corp</i>	poration adopts the following amendment(s)
If amending name, enter the new name of	of the corporation:	
name must be distinguishable and contain in "Corp.," "Inc.," or Co.," or the designation, ord "chartered," "professional association,"	"Corp." "Inc." or "Co". A profession	The new r "incorporated" or the abbreviation and corporation name must contain the
Enter new principal office address, if app	alianhta.	
Principal office address MUST BE A STREE	ET ADDRESS)	
		-
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	<u>:</u> CF ROY)	
1	CL BOX	
. If amending the registered agent and/or r new registered agent and/or the new regi	egistered office address in Florida, ente	er the name of the
new registered agent and/or the new regi	stered office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address;		
New Registered Office Address:	(City)	, Florida(Zip Code)
	(3.14)	(zip Code)
w Registered Agent's Signature, if changing	ng Registered Agent:	
nereby accept the appointment as registered a	gent. I am familiar with and accept the o	bligations of the position.
	Signature of New Registered Agent, if ch	anging

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>	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	VP	DIANA RUIZ	3458 NW 31ST AVE
Add			OKEECHOBEE FL 34972
X Remove			
2) Change	VP	JENARO ESPINOZA	705 NE 62ND AVE
X Add			OKEECHOOBEE FL 34972
Remove			
3) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			•
Remove			
(б) Change	_		
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
	endment if not contained in the amendment itself:
provisions for implementing the ame	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
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orovisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
orovisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment		, if other than the
date this document was signed Effective date if applicable:	7/14/2017	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.	nent(s)
	re approved by the shareholders through voting groups. The following start for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voung group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharel	holder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholde	er
07/1 Dated	4/2017	
Signature _	manuel Peuz	
(L Si	By a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary)	
	Manuel Ruiz (Typed or printed name of person signing)	
	President (Title of person signing)	