# P15000001809

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Special Instructions to Filing Officer:				

Office Use Only



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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Hamiltons Conserved P15000001	tuality Tomato Dis	stribution			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	James Hamilton					
	<del></del>	Name of Contact Person	n			
	Hamiltons Quality Tomato Distribution					
7860 S.W. 86 St. #25						
		Address				
	Miami, Fl. 3314					
		City/ State and Zip Cod	e			
ian	nesphamilton@	embargmail.d	com			
<u>,                                    </u>		sed for future annual report				
For further information concerning this matter, please call:						
James Hamilton at (941) 6612469						
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r 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)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
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**



15 MAR 20 AM 10: 50

### **Hamiltons Quality Tomato Distribution** (Name of Corporation as currently filed with the Florida Dept. of State)

P15000001809	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
VineRipe Tomatoes Inc	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4020 Nadira Manor Place
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Plant City, Fl. 33567
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4020 Nadira Manor Place
	Plant City, Fl. 33567
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	•
Name of New Registerea Agent	<del></del>
(Florida stre	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Registered A	gent, if changing
	G ' 7 G ' 6

## 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 <math>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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>	1	Name	<u>Addres</u> s
1) Change	N	A		
Add	1			
Remove				
2) Change				
Add				
Remove				
3) Change	<del></del>	_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

. <u>If amend</u> Attach <i>a</i> .	<mark>ling or adding a</mark> dditional sheets,	dditional Artic if necessary).	cles, enter chi (Be specific)	inge(s) here:			
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<u>If an am</u> provisio	endment provid ons for impleme	es for an exch:	ange, reclassi Idment if not	fication, or ca contained in t	ncellation of i	ssued shares,	
(if r	not applicable, in	dicate N/A)	idiițeiii ii iioi	tomanea iii t	ancidate.	1130111	
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The date of each amendment(s) ac	loption: N/A	DIAISION UF OR	RC DIMERSE	, if other than the
date this document was signed.		15 MAR 20	AH 10: 50	
Effective date if applicable:				
	(no more th	an 90 days after amendmeni	file date)	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado by the shareholders was/were su		The number of votes cast for	or the amendment(s)	
The amendment(s) was/were app must be separately provided for				
"The number of votes cast	for the amendment(s) was	were sufficient for approva	1	
by	(voting group)		,, -•	
	(voting group)			
The amendment(s) was/were ado action was not required.	pted by the board of direc	tors without shareholder act	ion and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators	without shareholder action a	and shareholder	
Dated 3-	16-15			
Dated3 Signature0	there I am	<u> </u>		
(By ≱ di	irector, president or other	officer – if directors or offic		
	d, by an incorporator — if it is the fiduciary by that fiduciary by that fiduciary by the f	n the hands of a receiver, tru	istee, or other court	
арропи				
	JAMES	HAMILTON		
	(Typed	or printed name of person s	igning)	
	$\mathcal{D}_{n-1}$			
	746	SIDEAT	<del></del>	
		(Title of person signing)		