

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H180002411043)))



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To:

Division of Corporations

Fax Number : (350) 617-6380

Eroni

Account Name : LEBRON ACCOUNTING SERVICES INC

Account Number : [20119000076 Phone : (813)877-8918 Fax Number : (513)514-2806

\*\*Ender the email address for this business entity to be used for furure annual report mailings. Enter only one small address please. \*\*

Email Address: |ebronaccounting@yahoo.com

## COR AMND/RESTATE/CORRECT OR O/D RESIGN GUTTERREZ FAMILY FARMS CORP

Certificate of Status	0
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Page Count	96
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Electronic Filling Menu

Corporate Filing Menu-

Help

H18000241104 3

## COVER LETTER

TO: Amendmein Seque Division of Corpo				
NAME OF CORPOR	ATION: GUTIERREZ FAI	MILY FARMS CORP		
DOCUMENT NUMB	ER: P15000012675	**************************************		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma-	tter to the following:		
	MILKA HASKINS CPA			
		Name of Contact Person		
:	LEBRON ACCOUNTING	Name of Contact Person	•	
		Firm/ Company		
	5116 N ARMENIA AVE	, mix confining		
		Address		
	TAMPA, FL 33603			
•		City/ State and Zip Code	A	
	E-mail address: (to be us	sed for future annual report se call:	notification)	
MILKA HASKINS CE	PA	813	877-8918	
Nansé o	Contact Person	Area Co	877-8918 de & Daytime Telephone Number	
Emplosed is a pheck to:	the following amount made	payable to the Florida Depa	irtment of State:	
\$35 Filing Fee	Os.i3.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is. enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is unclosed)	
Malling 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 Tallahissed, F1, 32301		

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	25	415. - VS
Articles of Amendment	308	2.3
to	<b>₽</b>	목당~
Articles of Incorporation of		근끊판
GUTIERREZ FAMILY FARMS CORP	골	<u> </u>
(Name of Corporation as currently filed with the Florida Dept. of State)	<u> </u>	
P15000012875	oten ∰i)	
(Document Number of Corporation (if known)		<u>&amp;_</u>
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following a statutes of Incorporation:	menúmen	n(s) to
A. If amending name, enter the new name of the corporation:		
au	йе пен	
thame must be distinguishable and contain the word, "corporation," "company," or "incorporated" or the abbit "Corp.," "lnc.," or "Co.," or the designation "Corp.," "lnc," or "Co". A professional corporation name must considered to "professional association," or the abbreviation "P.A."	reviation	
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
•••••		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the		
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida struct address)		
New Registered Office Address: Florida (City) Florida		
(City) (Zip Co.	(e)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the approximent as registered agent. I am familiar with and accept the obligations of the position.		
Signature of New Registered Agent, if changing		

## H18000241104 3

p.5

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 Clock; CEO = Chief. Executive Officer; CFQ = 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. Those 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	У.	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally South	
Type of Action (Check One)	Trile	Nume	Address
1) Change	S	LORENA M. GUTIERREZ	3300 BOOT BAY RD
X Add			PLANT CITY, FL 33563
Remove			
2) Change			
Add			
Removê			
3) Change	-	***	
Add			793001 10 may 10
Komove			
4) Change			
Add			
Кенюзе			
5) Change			
Add			
8)Change			
Add			
Remove			

H18000241104 3

p.6

ttach additiona	adding additional Ar Usheets, (finecessary)	. (Be specific)				
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		<del></del>				
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		<del></del>			***************************************	
			**************************************			<b></b>
~~~	***************					<b></b>
f an amendmei	nt provides for an ex	change reclassifi	ention or concel	lation of isoned sh	(PPK	
provisions for	implementing the ar icable, indicate N/A)	nendment if not c	ontained in the	mendment itself:		
(ŋ nei appi	wane, macate wa)					
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			<del></del>			

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	8/16/2018	
The date of each amendment(s		, if other than the
date this document was signed.		
	3/16/2018	
Effective date if applicable:		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	ni(s)
	approved by the shareholders through voting groups. The following stat for each voting group entitled to vote separately on the amendment(s):	emeņt
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
8/16/20	018	
Dated	· · · · · · · · · · · · · · · · · · ·	
	$\mathcal{L}$ $\mathcal{L}$	
X Signature L	times 1775	
(89	a director, president or other officer - if directors or officers have not be	cn.
sek	ested, by an incorporator - if in the hands of a receiver, trustee, or other c	ourt
app	ointed fiduciary by that fiduciary)	
	ELIAS GUTIERREZ	
	(Typed or printed name of person signing).	Andrean Theorem Control of the State of the
	PRESIDENT	
	(Title of person signing)	

Pige 4 of 4