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(Ci	ty/State/Zip/Phone	<del>e</del> #)
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FILED 17 OCT 24 AM II: 33

HM)
(07.00.2017)

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: IMEX	INTERNATIONA	L GROCERIES INC
		0029304	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	GERSON	MANCELO MIG Name of Contact Person	ulël
_		Name of Contact Person	
	IHEX INTER	Firm/ Company	DCERIES INC
_		Firm/ Company	
	3150 NW	99HIPL	
_		Address	<del> </del>
	Donal -	FL 33172  City/ State and Zip Code	
_		City/ State and Zip Code	!
<u>6e</u>	Figure 1. Million (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
JOHNNY	MANRIOUE	at (305	le & Daytime Telephone Number
Name of	Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	rtment of State:
S35 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)
	ng Address Iment Section		Address ment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment FILED

to

Articles of Incorporation 17 OCT 24 AH II: 32

Name of Corporation as currently 29304	y filed with the Florida Dept. of State)
	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3150 NW 99 HH PLACE DORAL - FL 331721
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3150 NW 99+H PLACE DOCAL -PL 33172
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	<del></del>
(Florida str	vet 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 v	
Signature of New R	Registered 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 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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	Victor Hos Livti SIVA	3150 NW99HS F
Add			DORAL-H 33172
Kemove			
2) Change	D	MARINA MARINHO ROSEND	
Add			DORAL-H 33172
X Remove			
3) Change	CEO	PEDRO Luiz Fonte St.	3150NW99HJst
Add			DORAL-PL 33172
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	sidment it not contained in the ginenament usen.
	<del></del>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ut(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated/0//3//7	
(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 components of appointed fiduciary by that fiduciary)	
GERSON MANCELO MIGUEL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	