## P15000053641

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<b>⇒</b> #)
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(Do	cument Number)	
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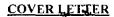
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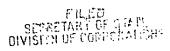
TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

Division of Corporations					
NAME OF CORPORATION: BLUE MARKET SEAFOOD, CORP					
DOCUMENT NUMBER: P15000053641					
The enclosed Articles of Amendment and fee are su	abmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
DIANUVYS DUA	RTE				
DILLEMADICET	Name of Contact Perso				
BLUE MARKET		<del>ΥΥ</del>			
	Firm/ Company				
1570 W 43RD PL	_ SUITE 1				
	Address				
HIALEAH, FL 33	012				
	City/ State and Zip Cod	le			
ramirezyoyi@yahoo.	com				
	sed for future annual report	notification)			
		,			
For further information concerning this matter, please call:					
DIANUVYS DUARTE	at (786	515-8184			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee \$ \text{Certificate of Status}\$	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building			

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



## BLUE MARKET SEAFOOD, CORP

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(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	– ng amendment(s) to
its Articles of Incorporation:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:  N/A	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	bbreviation
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	_
	<del></del>
	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maning address mall bl. ATVST OF THE BOA)	-
	_
	-
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	
N/A	
(Florida street address)	
New Registered Office Address: N/A , Florida (Zip Code)	
(слу) (гар Сове)	
New Registered Agent's Signature, if changing Registered Agent:	
l hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New 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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Si	mith	
Type of Action (Check One)	Title		Name	Address
1) Change	Þ		DIANUVYS DUARTE	1570 W 43RD PL
Add				SUITE 1
Remove				HIALEAH, FL 33012
2) Change	Р		GLORIA I RAMIREZ	1570 W 43RD PL
Add				SUITE 1
Remove				HIALEAH, FL 33012
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
		<del></del>		
Add				
Remove				

	(Be specific)
/A	
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment	(s) adoption: 07/28/2015	FILE TARY OF ifficiting than the
date this document was signed		DIVISION OF CORPE CORPE CORPE
Effective date if applicable:	07/28/2015	15 JUL 31 AM 9: 28
	(no more than 90 days afte	r umendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of re sufficient for approval.	votes cast for the amendment(s)
	e approved by the shareholders through voting d for each voting group entitled to vote separa	
	cast for the amendment(s) was/were sufficient	• •
by	(voting group)	
	(voling group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without sha	areholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareho	older action and shareholder
Dated 07/2	8/2015	
(B:	y a director, president or other officer – if directed, by an incorporator – if in the hands of a pointed fiduciary by that fiduciary)	ctors or officers have not been receiver, trustee, or other court
	DIANUVYS DUARTE	
	(Typed or printed name	of person signing)
	PRESIDENT	
	(Title of persor	signing)