Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

: SERVICIOS COMUNITARIOS LATINOS Account Name

Account Number : I20080000080 Phone ; (305) 642-1090

Fax Number : (305)642-1010

**Enter the email address for this business entity to be used for futile annual report mailings. Enter only one email address please ... *

COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUE OCEAN FOODS INC

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Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

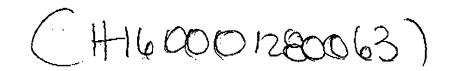
Help

(H160001280063)

COYER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: BLUE OCEAN FO	OODS INC	
DOCUMENT NUMBE			·
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
. 0	RISELL RODRIGUEZ		
		Name of Contact Person	1
P	RESIDENT		
_	······································	Firm/ Company	
1	0550 W STATE RD 84 LO	T 89	
_		Address ·	
I	AVIE, FL. 33324		
_	,	City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
GIGIN	UNEZ@YAHOO.COM		
	E-mail address: (to be us	ed for future annual report	notification)
	concerning this matter, pleas		(0/ 5010
GRISELL RODRIGUE		at (<u>954</u>	_) 696-5012
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations sox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



(H160001200063)

Articles of Amendment to

Articles of Incorporation

of

BLUE OCEAN FOODS INC				
(Name o	f Corporation as currently	filed with the Florida Dept	, of State)	
P16000008539				
- H 400	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporation 20	lopts the following	g amendment(s) to
A. If amending name, enter the new na	ime of the corporation:			
N/A				The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpore	rated" or the ab ution name must c	breviation contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		10550 W STATE RD 84 I	.OT 89	•
		DAVIE, FL. 33324		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10550 W STATE RD 84 i	OT 89	
		DAVIE, FL. 33324		
D. If amending the registered agent an		ss in Florida, enter the nan	ne of the	
new registered agent and/or the nev		·		
Name of New Registered Agent	GRISELL RODRIGUEZ			•
	10550 W STATE RD 84 LC	OT 89		_
	(Florida stree	t address)		
New Registered Office Address:	DAVIE		, Plorida	
	(C	City)	Zip C	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar wi	th and accept the obligation	as of the position	B.F. 84
	0		80 0 > 10 0 = 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	Signature of New Re	gistered Agent, if changing	52	

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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; CEQ = 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.

X Change	PT Jo	hn Doe	
X Remove	<u>v</u> <u>m</u>	ike Jones	•
_X Add	<u>sv</u> sa	lly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	CARLOS REIS	10979 SW 79 ST
Add			MIAMI, FL. 33178
X Remove			
2) Change	P	GRISELL RODRIGUEZ	10550 W STATE RD 84 LOT 89
XAdd			DAVIE, PL. 33324
Remove		•	
3) Change			
Add		•	
Remove			
4) Change			-
Add			
Remove			
5) Change	 	·	
Add			
Remove			
6)Change	,	· ,	
Add			
Remove			

Page 2 of 4
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<u>If amending or adding additional Arti</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)
	·
,	
	<u> </u>
<u> </u>	
_	
<u>I an amendment provides for an exch</u>	ange, reclassification, or cancellation of issued shares.
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exch- provisions for implementing the amer (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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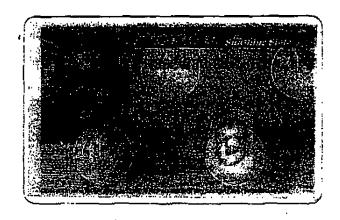
Page 3 of 4

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The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(no more than yo days after amenament file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 05/2012019
Signature
(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 court appointed fiduciary by that fiduciary)
CARLOS REIS
(Typed or printed name of person signing)
President ,
(Title of person signing)

Page 4 of 4

(H160001280063)



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IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 02-01-2016

Employer Identification Number:

81-1291362

Form: SS-4

Number of this notice: CP 575 A

BLUE OCEAN FOODS INC 10979 NW 79TH ST MIAMI, FL 33178

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 81-1291362. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related corresponded it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1120

03/15/2017

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. I (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, Election by a Small Business Corporation.

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