P180000 5335

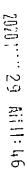
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C GOLDEN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: JUST CAROB CO	RP	
	BER: P18000005335		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ALTAIR FERREIRA		
		Name of Contact Person	
	JUST CAROB CORP		
	····	Firm/ Company	
	7901 4th St N Suite 300		
		Address	• .
	Saint Petersburg, FL 33702		
		City/ State and Zip Code	;
	gil@deamorimepa.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
ALTAIR FERREIRA		at (<u>516</u>	974-9870
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

, 1

JUST CAROB CORI	ZUZUT. 1129 ATTIL 46
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P18000005335	
(Docume	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida ts Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s)
A. If amending name, enter the new name of the cor	orporation:
	The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbrev	orporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDI</u>	
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u></u>
	
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered o	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida (City) (Zip Code)
lew Registered Agent's Signature, if changing Regis	istered Agent: I am familiar with and accept the obligations of the position.
neren, accept the appointment as registered agent.	i an familiar with and accept the oringations of the position.
Signat	iture of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	VP	CORDEIRO	CARLOS MARCELO	3590 COCO LAKE DR
Add				COCONUT GREEK, FL 33073
X Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change			 	
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				
Add				
Remove				

xttach <i>additional sh</i>	neets, if necessary).	(Be specific)			
					
	_				
					
					<u> </u>
 					
			-	·	
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		,			
	 -		·		
f an amendment p	rovides for an exch	nange, reclassification ndment if not conta	on, or cancellation	n of issued shares,	
(if not applicat	ble, indicate N/A)	nament ii not conta	med in the amen	ument usen.	
., ,,					
					

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Effective date if applicable: (no more than 90 days after amendment 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.	The date of each amendment(s) a	doption:	, if other than the
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 incorporators, or board of directors without shareholder action and shareholder action was not required. 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) Dated OSJASJ ARO Signature (By a director, passitent or other officer – if directors or officers have not been selected, by an iheorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ALTAIR FEREIRA	date this document was signed.		
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 incorporators, or board of directors without shareholder action and shareholder action was not required. 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) Dated OSJASJ ALO (By a director, physicent 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) ALTAIR FEREIRA	Effective date <u>if applicable</u> :		
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Dated OS S S S S S S S S S	"The number of votes case	for the amendment(s) was/were sufficient for approval	
Signature (By a director, passilient 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) ALTAIR FEREIRA	by		
Signature (By a director, passilient 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) ALTAIR FEREIRA		(voting group)	
(Typed or printed name of person signing)	Signature (By a consequence)	director, production of the officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or other diductions by that fiductions)	
(1) pour or printed maine or person (againg)		(Typed or printed name of person signing)	
PRESIDENT			
(Title of person signing)			