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R. WHITE MAY 25 2018

## **COVER LETTER**

TO: Amendment Section Division of Corporations

And the second

NAME OF CORPO	RATION: ALL FARM PRO	DUCE CORP	
DOCUMENT NUM	BER: P18000028523		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ROQUE N MUNOZ		
		Name of Contact Person	1
	ALL FARM PRODUCE CO	RP	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	68 SE 6 ST APT 1401		
		Address	
	MIAMI, FL 33130		
		City/ State and Zip Code	:
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
ROQUE N MUNOZ		at ( <u>80</u> 5	252-5991
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio Clifton	Address ment Section n of Corporations Building

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

18 MAY 24 AM 10: 29

ALL FARM PRODUCE CORP

ALL FARM PRODUCE CORP			CINTITUDE COLLE	
(Name of	Corporation as curren	tly filed with the Flori	da Dept. of State) - FURIDA	
P18000028523				
	(Document Number	of Corporation (if know	n)	
Pursuant to the provisions of section 607.19 ts Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corpor	cation adopts the following amendment(	
A. If amending name, enter the new nam	ne of the corporation:			
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or	"Co". A professional		
B. Enter new principal office address, if	annlicable:	68 SE 6 ST APT 1	401	
(Principal office address MUST BE A STREET ADDRESS)		MIAMI FL 33131		
Enter new mailing address, if applications (Mailing address MAY BE A POST O				
· · · · · · · · · · · · · · · · · · ·		960416		
		MIAMI, FL 33296		
O. If amending the registered agent and new registered agent and/or the new			the name of the	
Name of New Registered Agent				
-	(Florida s	treet address)		
New Registered Office Address:	68 SE 6 ST APT 1401 MIAMI		, Florida	
	(City)		(Zip Code)	
lew Registered Agent's Signature, if cha	nnging Registered Ager	ıt·		
hereby accept the appointment as register			ligations of the position.	
<del></del>	Signature of New	Registered Agent, if cha	moing	

Page 1 of 4

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

X Change	<u>PT</u>	John Doe		
X Remove X Add	<u>V</u> <u>SV</u>	Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	V	ANGEL GARRIGOS HONRUBIA	68 SE 6 ST APT 1401	
X Add			MIAMI, FL 33131	
Remove			u.ar.v.	
2) X Change	P	ROQUE N MUNOZ JR	68 SE 6 ST APT 1401	
Add			MIAMI, FL 33131	
Remove 3) $\frac{X}{X}$ Change	D	ROQUE N MUNOZ SR	68 SE 6 ST APT 1401	
, Add			MIAMI, FL 33131	
Remove				
4) X Change	D		68 SE 6 ST APT 1401	
Add			MIAMI, FL 33131	
Remove				
5) Change				
Add Remove			<del></del>	
6) Change				
Add Remove				

Attach additional	sheets, if necessary).	(Be specific)			
			· · · · · · · · · · · · · · · · · · ·		
<del></del>					
	·				
	<del></del>		_		· · · · · · · · · · · · · · · · · · ·
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<del></del> .	<del></del>	· · · · · · · · · · · · · · · · · · ·			<del></del> ,
lf an amendment	provides for an excl	iange, reclassifica	ition, or cancella	tion of issued sha	res.
provisions for im	iplementing the ame	ndment if not cor	tained in the am	endment itself:	<del></del>
(if not applice	able, indicate N/A)				
		<u> </u>			
			<del></del>	•	

The date of each amendment(s) adoption date this document was signed.	, if other than th
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Note: If the date inserted in this block do document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date will not be listed as that of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
☐ The amendment(s) was/were approved by must be separately provided for each vo	y the shareholders through voting groups. The following statement sting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	mendment(s) was/were sufficient for approval
by	
	(voting group)
■ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated ^ 5/17	113
Signature *	) - + + + + + + + + + + + + + + + + + +
(By a director, selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)
ROQL	E N MUNOZ
	(Typed or printed name of person signing)
P	
-	(Title of person signing)

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