P18000029912

(Re	questor's Name)	
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TO: Amendment Section

Division of Co	rporations		2		
NAME OF CORP	ORATION: Mango Verde Fresi	n Corp			
DOCUMENT NU	P18000020012				
The enclosed Articl	les of Amendment and fee are su	bmitted for filing.			
Please return all co	rrespondence concerning this ma	tter to the following:			
	Suikey G Hung Tineo				
		Name of Contact Perso	n		
	Mango Verde Fresh Corp				
		Firm/ Company			
	451 E Altamonte Dr Ste FS07	7			
		Address			
	Altamonte Springs, FL 32701				
	1512	City/ State and Zip Cod	le		
	capitaltax1610@gmail.com				
		sed for future annual repor	t notification)		
For further informa	tion concerning this matter, pleas	se call:			
Suikey G Hung Tir	neo .	at (⁷⁸⁶) 327-2153 ode & Daytime Telephone Number		
Name of Contact Person		Area Co	ode & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:		
S35 Filing Fee	S43.75 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

Mango Verde Fresh Corp

(Name o	of Corporation as currently	r filed with the Flo	<u>orida Dept. of St</u>	<u>iate</u>)	
P18000029912	• •	·			
<u>-</u>	(Document Number of	•			
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this A		poration adopts t	he following a	imendment(s) to
A. If amending name, enter the new n	ame of the corporation:				
N/A	_		*** / * • , •	T	he new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cartered," "professional association,"	Corp," "Inc." or "Co". A			abbreviation	"Corp"
B. Enter new principal office address,	if applicable:	1200 Pearl Tree	Rd :		
(Principal office address MUST BE A S		Deltona, FL 327	725		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1200 Pearl Tree	Rd _		
		Deltona, FL 327	25	·	
			<u> </u>		<u>~</u>
D. If amending the registered agent ar new registered agent and/or the new			er the name of		3= (III) (I)
Name of New Registered Agent	Ruth E Marte		7.		ம்
Name of New Arginerea Agent	375 N State Rd Stc 2207		· ·		12
	(Florida str	eet address)		·	<u>?</u>
M. B. C. LOW ALL	Altamonte Springs			. , 32714	٠, ٦
New Registered Office Address:	-	(City)	, Flori	ida(Zip Cod	le)
			•		
New Registered Agent's Signature, if c I hereby accept the appointment as regist			obligations of th	e nasitian	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		and accept the	is the	c position.	
	of 8 whole				
	Signature of New Ro		changing		
Check if applicable			rangera de Mario de su		
☐ The amendment(s) is/are being filed p	oursuant 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.

X Change	<u>PT</u>	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	Angel M Belfort Herrera	1200 Peral Tree Dr
X Add			Deltona, FL 32725
Remove			
2) Change	_	<u> </u>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Damova			

•	08/01/2023	
	mendment(s) adoption:	, if other thar
date this document	was signed. 03/30/2018	
Effective date <u>if ap</u>	oplicable:	
	(no more than 90 days after amendment file date)	
	nserted in this block does not meet the applicable statutory filing requirements, this control of the Department of State's records.	date will not be listed as
Adoption of Amen	dment(s) (CHECK ONE)	
The amendment(action was not re	(s) was/were adopted by the incorporators, or board of directors without shareholder ac equired.	tion and shareholder
	(s) was/were adopted by the shareholders. The number of votes east for the amendmenders was/were sufficient for approval.	rt(s)
	(s) was/were approved by the shareholders through voting groups. The following states tely provided for each voting group entitled to vote separately on the amendment(s):	ment
"The numb	ber of votes cast for the amendment(s) was/were sufficient for approval	
bv	,"	
· ·	(voting group)	
D	008/01/2023 Pated	
S	ignature July Aut.	
	(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 co-appointed fiduciary by that fiduciary)	
	Suikey G Hung Tineo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

the

the