## P19000031742

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## COVER LETTER

TO: Amendment S Division of C	orporation  ATION: MARINOLE FA	RMS INC	
	P19000031742 BER:		
NAME OF JM	BEK;		
	of Amendment and fee are su	ibmitted for filing.	
•	spondence concerning this ma	itter to the following:	
	BRYAN C RUIZ		
		Name of Contact Person	1
		Firm/ Company	
	3555 NW 33 STREET		
		Address	
	MIAMI, FL 33142		
		City/ State and Zip Cod	2
	BRYAN@AMERICANVET	.COM	
	~	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
BRYAN C RUIZ		305	637-8616
Name	of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copiss enclosed)
Ma	iling Address V	Street	Address
Amendment Section		Amendment Section	
Division of Corporations			on of Corpora'
P.O. Box 6327			Building
1 811	ahassee, FL 32314		executive ( / / / / / / / / / / / / / / / / / /

## Articles of Amendment to Articles of Incorporation of

MARINOLE FARMS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P19000031742 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 3555 NW 33 STREET B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33142 C. Enter new mailing address, if applicable: 3555 NW 33 STREET (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33142 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 (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	V	ORESTES R RUIZ	1801 NW 119 STREET
Add			MIAMI, FL 33167
Remove			
2) Change	Р	ELADIO A. RUIZ	3555 NW 33 STREET
X Add			MIAMI, FL 33142
Remove 3) Change	D	BRYAN C RUIZ	3555 NW 33 STREET <b>3</b>
X Add			MIAMI, FL 33142
Remove			DF STALL DRUG
4) Change			
Add Remove			
5) Change			<u></u>
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
		-	
	S		
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	ORIDA	කා සා සැ	
N/A	<u>-</u> .	<del></del>	
	**·		· .
	<u> </u>		<u>.</u>

The date of each amendment(s) act this document was signed.	loption:	, if other than
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bootunent's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as t
doption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendmen fficient for approval.	ıt(s)
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	·"	
	(voting group)	
action was not required.  The amendment(s) was/were ado action was not required.  Dated	pted by the board of directors without shareholder action and shareholder  pted by the incorporators without shareholder action and shareholder  rector, president or other officer – if directors or officers have not bee  the by an incorporator – if in the hands of a receiver, trustee, or other co  ed fiduciary by that fiduciary)  ALEJANDRO CORREA	FILED  19 JUN 24 AM ID 48  SECRETARY OF STAIL ALLAHASSEET FLORIDA
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	