P190000 45144

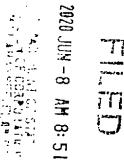
(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name	e)
(Dox	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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JUN 25 7070 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: RT NUA	RSERY & DR	ABON FRUITS, CORP
DOCUMENT NUMB	0190000	15144	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Reynald	o Tornes	
- -	RT NURSER		Fruits, Coap.
	3600 SW	Firm/Company 129 Aue	
-	MiAMi,	Florida - 3.	3125
-	<u> </u>	City/ State and Zip Code	
-	KSACORP @ E-mail address: (to be us	yahoo. ES red for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
REYNAL	do Tornes	30s	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
Ame Divis	ing Address adment Section ion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

		ρ	_	- 01	
$\mathcal{D}\mathcal{T}$	NURSERY	K .	DOLLAND	Fauite	(000
\sim /	/ 4 ~ GC/C/		X NO UN	1 124113	, CV-, .

(Name of Corporation as currently filed with the Florida Dept. of State)

P190000 45144

(Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	V	WENdy Tornes	3600 SW 129 AUG MIAMI, FL - 3317
_ X _ Add			MIAMI, FL - 33/7
Remove			
2) Change	· · · · · ·		
Add			
Remove Change			-
Add			
Remove			
4)Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

atach additional sheets, if necessary).— (Be specific	N/A	
······································		
		·
		
f an amendment provides for an exchange, reclas	ssification, or cancellation of issued shares.	
provisions for implementing the amendment if no (if not applicable, indicate N/A)	ot contained in the amendment itself:	
ty not appreciate, materic tour	N/A	
<u> </u>		

.

The date of each amendment(s) add	ption: 06 /01 /2020	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep.	ck does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendme icient for approval.	ent(s)
	oved by the shareholders through voting groups. The following statuch voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
hy		
	(voting group)	
Dated 06/0	1/2020 Cdi- ctol, president or other officer - if directors or officers have not be	
selected,	by an incorporator – if in the hands of a receiver, trustee, or other e I fiduciary by that fiduciary)	
_	REYNALDS TORRES (Typed or printed name of person signing)	
		
	PRESIDENT	

(Title of person signing)

the