## P190000 58140

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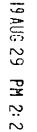


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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: \_\_\_ CVF FOODS, CORP DOCUMENT NUMBER: P19000058140 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **GLAUCIA BASTOS** Name of Contact Person THE TRUST CIRCLE SERVICES, LLC Firm/ Company 1001 EAST SAMPLE ROAD 10E Address POMPANO BEACH FLORIDA 33064 City/ State and Zip Code ATENDIMENTO@THETRUSTCIRLCLE.INFO E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( Area Code & Daytime Telephone Number **GLAUCIA BASTOS** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CVF FOODS, CORP						
( <u>Name</u>	of Corporation as current	tly filed with the Florida Dep	t. of State)			
P19000058140						
	(Document Number of	of Corporation (if known)				
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation a	dopts the follo	owing am	endme	ent(s)
A. If amending name, enter the new n	ame of the corporation:					
				Thv	<i>. ภ</i> ะพ	,
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpore		he abbres	viation	1
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		1001 EAST SAMPLE R	OAD 10E			
		POMPANO BEACH, FL	ORIDA 3306	54		
•			_	(A) (70)	201	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SAME AS ABOVE		**************************************	2019 AUG 29	7
			·	. (7)	PM 2:	in the second se
D. If amending the registered agent as	nd/or registered office add	lress in Florida, enter the nan	ne of the	T A	42	
new registered agent and/or the ne	w registered office addres	<u>s:</u>				
Name of New Registered Agent	GLAUCIA BASTOS					
	1001 EAST SAMPLE R	OAD 10E		<del></del>		
	(Florida street address)					
New Registered Office Address:	POMPANO BEACH		. Florida	64		
		(City)	• —	(Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regis			is of the pociti	ion		
25, accept the appointment as regis	A ?	тт или иссера те отідинт	элд тероми	W.		

Signature of New Registered Agent, if changing

,	address of each Officer (Attach additional sheets Please note the officer/di P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove Example:	and/or L , if neces, irector tit, Presiden = Chief , Direct I in the fo wes the c , and Sai	Director being added: sary) le by the first letter of the office title: it: T = Treasurer; S = Secretary; D = Director; The Financial Officer. If an officer/director holds m or would be PTD. ollowing manner. Currently John Doe is listed as sorporation, Sally Smith is named the V and S. Th lly Smith, SV as an Add.	icer/director being removed and title, name, and  R= Trustee; C = Chairman or Clerk; CEO = Chief  ore than one title, list the first letter of each office  the PST and Mike Jones is listed as the V. There is  nese should be noted as John Doe, PT as a Change,
	X Change	<u>PT</u>	John Doe	
	$\underline{X}$ Remove	<u>V</u>	Mike Jones	
	X Add	<u>sv</u>	Sally Smith	
	Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
	1) Change			
	Add			<del></del>
	Remove			
	2) Change			
	Add			
	Remove			
	3 ) Change			<del></del>
	Add			
	Remove			
	4) Change			
	Add			·
	Remove			
	5) Change			
	Add			
	Remove			

6) \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_\_ Remove

	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angel if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angent if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 d	ays after amendment file date)
Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The nu by the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	
"The number of votes cast for the amendment(s) was/were s	ufficient for approval
by(voting group)	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors with action was not required.	thout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
08/10/2019	
Dated	<u> </u>
Signature	
(By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	
COCHISE S MARTIS	
(Typed or printed nan	ne of person signing)
PRESIDENT	
(Title of p	erson signing)