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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: C. Velasco Harvesting Inc. DOCUMENT NUMBER: P20000010518					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Tessa Graham Name of Contact Person					
Graham Income Tax Serice Ivc.					
120 N LHE AVE.					
Wanchuly Fr 33873					
City/ State and Zip Code + essa@gits.biz E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Contact Person at (863), 773 – 2637 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, Fl. 323142415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303					

Articles of Amendment

to
Articles of Incorporation

C. Velasco Hervestring (Name of Corporation as current) P20000010518	Inc.	
(Name of Corporation as current)	iv filed with the Florida Dept. of State)	
P2000010510	66 (61)	
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
C. Velasco Harvesting Inc		77
name must be distinguishable and contain the word "corporation," "c	company," or "incorporated" or the abbr	
"Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."		contain the word
B. Enter new principal office address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)		
	-	•
		~
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u> </u>
	•	<u> </u>
D. If amending the registered agent and/or registered office addi	race in Clarida, antau the name of the	EN 3: 26
new registered agent and/or the new registered office address		25 Albi
Name of New Registered Agent		<i>-</i>
<i>N</i>)	<u> </u>	
(Florida str	veet address)	
New Registered Office Address:	, Florida,	(Zip Code)
	•	·
Name Danistanud Ament's Cinnetson if about in Danistanud Ament		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v		sition.
LIA		
NIA		
Signature of New R	Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607 0120 (11).	(a) ES	

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 Doc 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name NIA	<u>Addres</u> s
1) Change		-NIA	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NIA
N / ^1

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)
NA

The date of each amendment(s) adoption:	1/29/2020	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	1/29/2020	
(no m	tore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State's		this date will not be listed as the
Adoption of Amendment(s) (CHECK C	<u>ONE</u>)	
The amendment(s) was/were adopted by the incorporaction was not required.	orators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva		dment(s)
☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group		
"The number of votes cast for the amendment	(s) was/were sufficient for approval	
by		
(voting gro	чр)	
Dated 2/28/20	120	
	Ve lasco	
	r other officer – if directors or officers have not or – if in the hands of a receiver, trustee, or oth at fiduciary)	
(Typed	or printed name of person signing)	
(Title o	f person signing)	

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