P21000055670

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A. Butter

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: JBV HARVESTIN	G CORP.		
DOCUMENT NUMB				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	FELIX M. DIAZ JR			
		Name of Contact Person		
	FELIX M. DIAZ JR PA			
	Firm/ Company			
	519 N KROME AVENUE			
	Address			
	HOMESTEAD, FL 33030			
City/ State and Zip Code				
	alpro 18@bellsouth.net			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
FELIX M. DIAZ JR		at (³⁰⁵	_) 245-2888	
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	irtment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address Indment Section Sion of Corporations Box 6327 Inhassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

JBV HARVESTING CORP.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)	
P21000055670			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, thi	s Florida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association.	Corp, " "Inc, " or "Co".	"company," or "incorporated" or the abbrev A professional corporation name must co	viation "Corp.," ontain the word
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S			 -
			
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST OFFICE BOX)		N/A	
			
D. If amending the registered agent ar			
new registered agent and/or the new	-	ss:	
Name of New Registered Agent	N/A		
	(Florida :	treet address)	
New Registered Office Address:	N/A	, Florida	
			(Zip Code)
New Registered Agent's Signature, if c		11: r with and accept the obligations of the posit	ion.
	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.

X Change	<u>PT Je</u>	ohn Doe	
X Remove	<u>v</u> <u>v</u>	<u> Aike Jones</u>	
X Add	<u>sv</u> <u>s</u>	alty Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	IVAN VALENCIA	216 NW 5TH AVENUE
Add			FLORIDA CITY, FL 33034
X Remove			
2) Change	P	IVAN VALENCIA ARREDONDO	216 NW 5TH AVENUE
X Add			FLORIDA CITY, FL 33034
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional A (Attach additional sheets, if necessar)	rucies, enter change(s) here: c). (Be specific)	
	y. (De sprague)	
N/A		
		
		-
<u> </u>		
. If an amendment provides for an e	xchange, reclassification, or cancell	ation of issued shares,
provisions for implementing the a	mendment if not contained in the a	mendment itself:
(if not applicable, indicate N/A	l .	
N/A		

.

	06/14/2021	Cuelum elements
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this dat epartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder actio	n and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	;)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following stateme reach voting group entitled to vote separately on the amendment(s):	nı
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
bv	<u>.</u>	
,	(voting group)	
06/14/202	1	
Dated		
Signature		
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	IVAN VALENCIA ARREDONDO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	