

P950000 28628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

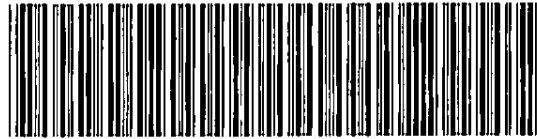
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
AUG 14 2025

Office Use Only



200455812692

2025 AUG 13 AM 9:19

RECEIVED

2025 AUG 13 AM 9:52
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 8/12/2025

PRIORITY Regular Approval

OUR REF.# (Order ID#) 1399367

ORDER ENTITY
DELCONTE PACKAGING, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

DELCONTE PACKAGING, INC. (FL)

File the attached amendment

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "VJ" or similar, written over a horizontal line.

Please bill us for your services and be sure to include our reference number on the invoice and
counner package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Articles of Amendment – DelConte Packaging, Inc.

The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Name of Person:	Stephen F. Voigt
Firm/Company	Voigt Law Group, P.A.
Address	2042 Bee Ridge Road
City/State and Zip Code	Sarasota FL 34239

E-mail address: ugo@customtray.com (to be used for future annual report notification)

For further information concerning this matter, please call: 941-925-2324

Articles of Amendment
to
Articles of Incorporation
of

DELCONTE PACKAGING, INC.

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

P95000028628

(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:

The new 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."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

501 PAUL MORRIS DRIVE P.O. BOX 18463
ENGLEWOOD, FL 34223 SUCCESOTA FL
34276

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 ELIZABETH NJOKU

501 PAUL MORRIS DRIVE

(Florida street address)

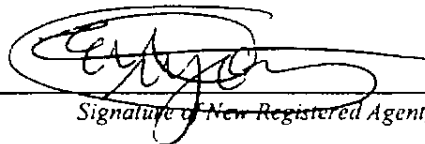
New Registered Office Address: ENGLEWOOD, Florida 34223

(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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ☐ Change	<u>P</u>	<u>WILLIAM H. BLOCK</u>	<u>757 W. 26TH STREET</u>
☐ Add			<u>HIALEAH FL 33010</u>
☒ Remove			
2) ☐ Change	<u>V</u>	<u>WILLIAM D. BLOCK</u>	<u>757 W. 26TH STREET</u>
☐ Add			<u>HIALEAH FL 33010</u>
☒ Remove			
3) ☐ Change	<u>ST</u>	<u>DONNA L. DANIELS</u>	<u>757 W. 26TH STREET</u>
☐ Add			<u>HIALEAH FL 33010</u>
☒ Remove			
4) ☐ Change	<u>PSD</u>	<u>ELIZABETH NJOKU</u>	<u>501 PAUL MORRIS DRIVE</u>
☒ Add			<u>ENGLEWOOD FL 34223</u>
☐ Remove			
5) ☐ Change	<u>VTD</u>	<u>UGOCHUKWU NJOKU</u>	<u>501 PAUL MORRIS DRIVE</u>
☒ Add			<u>ENGLEWOOD FL 34223</u>
☐ Remove			
6) ☐ Change			
☐ Add			
☐ Remove			

[illegible][illegible]

The date of each amendment(s) adoption: August 11, 2025, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

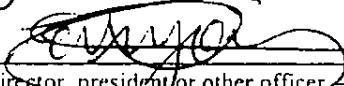
Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval
by _____"
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated Aug 11, 2025

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ELIZABETH NJOKU

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)