P98000028988

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COVER LETTER

	·	COVER LETTER	,	
TO: Amendment Sec Division of Cor				15 JUN 22
NAME OF CORPO	PRATION: DOMINGUEZ PR	RODUCE INC		22
DOCUMENT NUM	DOGOOOOOO			3
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.		PM 8: 13
Please return all corr	espondence concerning this ma	tter to the following:		
	MARIA J ALVARADO			
		Name of Contact Person	n	
	DOMIGUEZ PRODUCE AND FARMS, CORP			
Firm/ Company			<u></u>	_
PO BOX 1091				
		Address		
	WIMAUMA, FL. 33598			
		City/ State and Zip Cod	e	
JOS	E@ACCOUNTINGWORKSE	ЮР.СОМ		
	E-mail address: (to be u	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
MARIA J ALVARA	ADO	at (956-7286	
Name	of Contact Person	Area Code & Daytime Telephone Num		ber
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 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)	
<u>M</u> ;	ailing Address		Address	
	nendment Section		Iment Section	
	vision of Corporations O. Box 6327		on of Corporations Building	
	llahassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

F M E D 15 JUN 22 PM 8: 13

DOMIGUEZ PRODUCE, INC

					Ψ
(<u>Name</u>	of Corporation as currently filed w	vith the Florida Dept. of State)	79	<u> </u>	
P98000028988			語	ū	
	(Document Number of Corpora	ation (if known)	75		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the follo	wing amer	ndment	(s) to
A. If amending name, enter the new na	me of the corporation:				
DOMINGUEZ PRODUCE AND FARM	, CORP		The	new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co". A		e abbrevio	ation	
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>					
C. Enter new mailing address, if appli					
(Mailing address MAY BE A POST)	OFFICE BOX)				
D. If amending the registered agent an	dar registered office address in E	lorida, enter the name of the			
new registered agent and/or the new		torida, enter the mate of the			
Name of New Registered Agent	JOSE S RAMOS				
traing of their riegistered rigen	2344 CRESTOVER LANE				
	(Florida street addre	ss)			
New Registered Office Address:	WESLEY CHAPEL	. Florida	4		
<u></u> .	(Ciţy)		Zip Code)	—	
Nam Dagistanad Agantla Simuatuna if a	hansing Desigtaned Agents				
New Registered Agent's Signature, if c I hereby accept the appointment as regist		accept the obligations of the position	o n .		
	Nignature of New Registered	d 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:	i una sa	зу этип, эт из <i>ин лии</i> .	
X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	***		
Remove			
Kemove			
6) Change			
Remove			

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

JUNE 19,2015
The date of each amendment(s) adoption:
•
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 "
by
☐ 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.
JUNE 19,2015 Dated
Signature Marie J D Lara & O (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)
MARIA JULIA ALVARADO
(Typed or printed name of person signing)
PRESIDENT AND DIRECTOR
(Title of person signing)