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M. THOMAS MAR 1 0 2009 EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: AgraGlobal,				
	(Name of Limi	ited Liability Company)		
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Nicholas Glasnovich			
		(Name of Person)		
	AgraGlobal, LLC			
	 	(Firm/Company)		
	101 S Fort Lauderdale Beac			09 MAR -9 AM 10: 58 SECRETARISE OF STATE TALLAHASSEE PLORIDA
		(Address)		題声音
	Fort Lauderdale, FL 33316			· · · · · · · · · · · · · · · · · · ·
		(City/State and Zip Code)		P.S.
For further information con	ncerning this matter, please ca	all:		SALE SALE
Nicholas Glasnovich		at (954) 703-6209		
(Name of	Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	following amount:			
□ \$25.00 Filing Fee	■\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing F Certificate of Certified Cop (additional co	Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AgraGlobal, LLC			
(Name of the Limited Liabile	ity Company as it now appears on our a Limited Liability Company)	records.)	
(A FIORE	a Emilied Liability Company)		
The Articles of Organization for this Limited Liability	Company were filed on September 26.	, 2008 and assigned	
Florida document number L08000093547			
Plotida document number	.		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here:		
The new name must be distinguishable and end with the w "L.L.C."	yords "Limited Liability Company," the c	lesignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
		09 HAR	
Enter new mailing address, if applicable:		PÉG F	
(Mailing address MAY BE A POST OFFICE BOX)		超了	
	 	n = =	
B. If amending the registered agent and/or reg	istered office address on our reco	rds, enter the name the new	
registered agent and/or the new registered office ad	<u>ldress here</u> :	DM O	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		, Florida	
	(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Ma	anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM_	Israel Yunger	19470 NE 22nd Road North Miami Beach, FL 33179	Add Remove
			Add Remove
			Add Remove
			Add Remove
			09 MARY OF AM
D. If amendi	ing any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	M 10: 58
			
Dated ³ March	20	009	
Dated 5 March	ngh		
•	Signature of a mer Nicholas Glasnovich	mber or authorized representative of a member	
-	Ту	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00