## N110000000109

| (Re                     | equestor's Name)   |             |  |  |  |
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| (Ad                     | ldress)            |             |  |  |  |
| (Cit                    | ty/State/Zip/Phone | e #)        |  |  |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |  |  |
| (Bu                     | ısiness Entity Nan | ne)         |  |  |  |
| (Do                     | ocument Number)    |             |  |  |  |
| Certified Copies        | _ Certificates     | s of Status |  |  |  |
| Special Instructions to | Filing Officer:    |             |  |  |  |
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I ALBRITTON

## **COVER LETTER**

| TO: Amendment Section Division of Corporations                 |   |
|--|---|
| NAME OF CORPORATION: Agricultura                               | 1 Development International, I.                                   |
| DOCUMENT NUMBER: N 17000007                                    |   |
| The enclosed Articles of Amendment and fee are submitted for   | or filing.  |
| Please return all correspondence concerning this matter to the | following:  |
| Abduljabbar Salman   |   |
| (Name  | of Contact Person)  |
| And an thurst Days began                                       | A Tubernalismal Inc   |
| Agricultural Developmen  | rm/ Company)  |
| una a un alima Cuark   | C:xtle  |
| 11296 Moonshine Creek  | (Address)   |
|  | (Additional)  |
| Orlando, FL 32825<br>(City/s                                   |   |
|  | tate and Zip Code)  |
| into padi-inc. org   |   |
| E-mail address: (to be used for futu                           | ire annual report notification)                                   |
| For further information concerning this matter, please call:   |   |
| Abduljabbar Salman   | at <u>850 - 319 - 8489</u> (Area Code) (Daytime Telephone Number) |
| (Name of Contact Person)                                       | (Area Code) (Daytime Telephone Number)                            |
| Enclosed is a check for the following amount made payable to   | the Florida Department of State:                                  |
| ☐ \$35 Filing Fee <b>※</b> \$43.75 Filing Fee & ☐\$43.7        | 75 Filing Fee & \$\Bigs\sum \\$52.50 Filing Fee                   |
| Certificate of Status Certificate                              | fied Copy Certificate of Status                                   |
|  | itional copy is Certified Copy osed) (Additional Copy is          |
|  | Enclosed)   |
| Mailing Address  | Street Address  |
| Amendment Section Division of Corporations                     | Amendment Section Division of Corporations                        |
| P.O. Box 6327  | Clifton Building  |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2017

ABDUJABBAR SALMAN AGRICULTURAL DEVELOPMENT INT'L INC 11296 MOONSHINE CREEK CIRCLE ORLANDO, FL 32825

SUBJECT: AGRICULTURAL DEVELOPMENT INTERNATIONAL, INC.

Ref. Number: N17000000709

We have received your document for AGRICULTURAL DEVELOPMENT INTERNATIONAL, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 117A00005965

## Articles of Amendment to Articles of Incorporation of

Agricultural Development International, Inc.

| N17000000709   | lumber of Corporation (         | if known)                                   |
|--|---------------------------------|---|
| (Document 14   | tamber of corporation (         | A Kilowii)                                  |
| suant to the provisions of section 617.1006, Florida St<br>endment(s) to its Articles of Incorporation:  | atutes, this <i>Florida Not</i> | For Profit Corporation adopts the following |
| If amending name, enter the new name of the corpo  | oration:                        |   |
|  | •                               | m.  |
| ne must be distinguishable and contain the word "corp  | noration" or "incornor          | The new                                     |
| ompany" or "Co." may not be used in the name.  | portuion or incorpor.           | alea or the aboreviation Corp. or the.      |
|  |                                 |   |
| Enter new principal office address, if applicable:   | ·                               | · · · · · · · · · · · · · · · · · · ·       |
| ncipal office address <u>MUST BE A STREET ADDRE</u>  | <u> </u>                        |   |
|  |                                 | 70 B  |
|  |                                 | F8 = 17                                     |
|  |                                 | <b>温 另一</b>                                 |
| Enter new mailing address, if applicable:  |                                 |   |
| (Mailing address MAY BE A POST OFFICE BOX)   |                                 |   |
|  |                                 | May 2 6                                     |
|  |                                 | <u> </u>                                    |
| ·  |                                 | 70 N  |
| If amonding the resistance agent and/or registered   | office address in Flori         | <b>→</b>                                    |
| If amending the registered agent and/or registered<br>new registered agent and/or the new registered off |                                 | ida, enter the name of the                  |
| new registered agent and/or the new registered orr   | ice address.                    |   |
| Name of New Registered Agent:  | <u></u>                         |   |
|  |                                 |   |
|  |                                 | (Florida street address)                    |
| New Registered Office Address:   |                                 |   |
|  |                                 |   |
| ·  | (((()))                         | , Florida                                   |
|  | (City)                          | (Zip Code)                                  |
| v Registered Agent's Signature, if changing Registe  | ered Agent:                     |   |
| reby accept the appointment as registered agent. I a   |                                 | ept the obligations of the position.        |
|  |                                 | · • • • •                                   |

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 <math>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: X Change X Remove X Add |              | Doe<br>Jones<br>Smith |  |
|----------------------------------|--------------|-----------------------|--|
| Type of Action (Check One)       | <u>Title</u> | <u>Name</u> .         | <u>Addres</u> s                                      |
| Change Add Remove                | <u> </u>     | Zohair Mohsen         | 3135 Hawks Ave.<br>Ann Arbor, MI<br>48108            |
| 2) Change Add Remove             | <u>D</u> _   | Hayder Al-Taie        | 8020 Fairview Dr. Tamarac, FL 33321                  |
| 3) Change Add Remove             | D            | Layla Sekari          | 11296 Moonshine<br>Creek Circle<br>Orlando, FL 32825 |
| 4),Change Add Remove             | <u>D</u>     | Zaynab Salman         | 3/97 Foley Dr. Tallahasses FL 32309                  |
| 5) Change Add Remove             |              | *                     |  |
| 6) Change Add Remove             |              |                       |  |

| . If amending or adding additional Ar (attach additional sheets, if necessary). | (Be specific) |   |          |               |              |
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|      | ne date of each amendment(s) adoption:<br>te this document was signed.                           | April            | 11,20                 | )17              | · · · · · · · · · · · · · · · · · · · | , if other than the |
|------|--|------------------|-----------------------|------------------|---------------------------------------|---------------------|
| Effe | fective date <u>if applicable</u> :  |                  |                       |                  |                                       |                     |
|      | (no m  | ore than 90 day  | ys after amendi       | nent file date)  |                                       |                     |
|      | te: If the date inserted in this block does not recument's effective date on the Department of S |                  | able statutory f      | iling requireme  | ents, this date will no               | ot be listed as the |
| Ado  | loption of Amendment(s) (CHI   | ECK ONE)         |                       |                  |                                       |                     |
|      | The amendment(s) was/were adopted by the was/were sufficient for approval.                       | e members and t  | the number of         | votes cast for t | he amendment(s)                       |                     |
| ď    | There are no members or members entitled to adopted by the board of directors.                   | to vote on the a | mendment(s).          | The amendme      | nt(s) was/were                        |                     |
|      | Dated April 11,  | 2017             |                       |                  |                                       |                     |
|      | Signature  (By the chairman or vice of have not been selected, bother court appointed fide       | chairman of the  | tor – if in the h     |                  |                                       |                     |
|      | Abduljak   | (Typed or pr     | Salma inted name of p | person signing)  | 1.D.                                  |                     |

President and CEO

(Title of person signing)