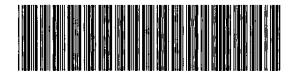
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| PICK-UP                                 | ☐ WAIT            | MAIL      |
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| Certified Copies                        | _ Certificates    | of Status |
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ASI Chemical, Inc. DOCUMENT NUMBER: P00000002778 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: J.W. Taylor, Esq. Name of Contact Person Taylor & Associates, Attorneys at Law, P.L. Firm/ Company 20 3d Street SW, Suite 209 Address Winter Haven, FL 33880 City/ State and Zip Code raulidiaz@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (863) 875-6950

Area Code & Daytime Telephone Number Jo Kirkland Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

FILED

of 2013 NOV -7 PM 4: 24 ASI Chemical, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P00000002778 (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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: J.W. Taylor, Esq. Name of New Registered Agent 20 3d Street SW, Suite 209 (Florida street address) Winter Haven New Registered Office Address: (City) 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.

Page 1 of 4

f New Registered Agent, if changing

Signatur

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: X Change             | PT           | John Doe             |                            |
|-------------------------------|--------------|----------------------|----------------------------|
| X Remove                      | <u>V</u>     | Mike Jones           |                            |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith          |                            |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>          | <u>Addres</u> s            |
| 1) Change                     | SD           | Mayra Houston        | 1901 State Rd. 60 W        |
| Add                           |              |                      | Lake Wales, FL 33859       |
| Remove                        |              |                      |                            |
| 2) Change                     | D            | Thalia Montes De Oca | 1901 State Rd. 60 W        |
| ✓ Add                         |              |                      | Lake Wales, FL 33859       |
| Remove                        |              |                      |                            |
| 3) Change                     |              |                      |                            |
| Add                           |              |                      |                            |
| Remove                        |              |                      |                            |
|                               |              |                      |                            |
| 4) L Change                   |              |                      |                            |
| Add                           |              |                      |                            |
| Remove                        |              |                      | <del> </del>               |
| 5) Change                     |              |                      |                            |
| Add                           |              |                      |                            |
| Remove                        |              |                      | 10-1700 A ALEXTER A LINE - |
| I Kelliove                    |              |                      |                            |
| 6) Change                     |              |                      |                            |
| Add                           |              |                      |                            |
| Remove                        |              |                      |                            |

| . If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific) |  |  |  |  |
|---|--|--|--|--|
|   | (be specific)  |  |  |  |
| V/A   |  |  |  |  |
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| If an amendment provides for an exch  | nange, reclassification, or cancellation of issued shares, |  |  |  |
| provisions for implementing the ame   | endment if not contained in the amendment itself:          |  |  |  |
| (if not applicable, indicate N/A)   |  |  |  |  |
| N/A   |  |  |  |  |
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| The date of each amendment(s) adoption: 10/31/2013   | , if other than the |
|--|---------------------|
| date this document was signed.   |                     |
| Effective date if applicable:  | ·- ·                |
| (no more than 90 days after amendment file date)   |                     |
| 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 east 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 14/13 Signature Raul J. 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) |                     |
| Raul J. Diaz   |                     |
| (Typed or printed name of person signing)  |                     |
| President  |                     |
| (Title of person signing)  |                     |