## P05000090172

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CO	CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):						
1.	BOTAN:	ICA LA AFRICANA INC. (DOCUMENT #) POSOOO90172					
2.	•	705000090172					
	(Corporation Name)	(Document #)					
3.	(Corporation Name)	(Document#)					
4.							
⊸.	(Corporation Name)	(Document #)					
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	NEW FILINGS	AMENDMENTS 2					
	Profit	Amendment					
	NonProfit	Resignation of R.A., Officer/ Director					
	Limited Liability	Change of Registered Agent					
	Domestication	Dissolution/Withdrawal					
L	Other	Merger					
	OTHER FILINGS	REGISTRATION/ OUALIFICATION					
	Annual Report	Foreign					
	Fictitious Name .	Limited Partnership					
	Name Reservation	Reinstatement					

Trademark

Other

CR2E031(9/92)

## **Articles of Amendment** to Articles of Incorporation of

FILED

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## **BOTANICA LA AFRICANA INC.**

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

SECRETARY OF STATE

	P05000090172	TELAMASSEE, FLORIDA
(Document Num	iber of Corporation (if know	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation adopts the following
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain tabbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>	licable: TADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		<del></del>
D. If amending the registered agent and/or r new registered agent and/or the new regis		Florida, enter the name of the
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	(Florida street ac	ddress)
		, Florida
•	(City)	(Zip Code)
New Registered Agent's Signature, if changin	g Registered Agent:	
I hereby accept the appointment as registered a	gent. I am familiar with ar	nd accept the obligations of the position.
	ignature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	JOAQUINA B. MELO	9562 SW 40 STREET MIAMI FL 33165	☑ Add ☐ Remove
			☐ Add ☐ Remove
<del></del>			☐ Add ☐ Remove
	tional sheets, if necessary). (Be specij		
provisions	ndment provides for an exchange, rec of for implementing the amendment if t		
(if not a	applicable, indicate N/A)		

The date of each amendment(s)	adoption: 09-08-09
Effective date if applicable:	(date of adoption is required)
(n	o more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	oting group)
(vo	oting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 09-08-0	9
selecte	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
61.	MIGUEL MELO
	(Typed or printed name of person signing)
	PSTD
	(Title of person signing)