## P1000017602

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APR 0 4 2014 C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Natural Gre	en Products Co	rp.
DOCUMENT NUME	BER: P1000001760	2	
	of Amendment and fee are su		
Please return all corres	pondence concerning this mat	ter to the following:	
	Wilda Malara		
•		Name of Contact Person	1
	Ace HR Associate	es. Inc.	
		Firm/ Company	
	5640 NW 120 Te	• •	
		Address	
	Coral Springs, FL	33076	
	<u> </u>	City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
۸۵۵	JUD Associates @a		
ACE	HRAssociates@a	aOI.COIII ed for future annual report	notification)
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
	, r		
Wilda Malara		<sub>at (</sub> 954	, 461-1818
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	rtment 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)
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	
i ditalasso, i is 2517		Tallahassee, FL 32301	

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

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14 APR -1 AM 9: 28

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Natural Green Products Corp.

(Documen	t Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation ad	opts the following amendmen
A. If amending name, enter the new na	me of the corporation:		
Ace HR Associates, Inc.			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or "Ce	". A professional corpora	rated" or the abbreviation tion name must contain the
B. Enter new principal office address, i		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent and new registered agent and/or the new		s in Florida, enter the nam	e of the
Name of New Registered Agent	N/A		
2			
	(Florida stree	address)	
New Registered Office Address:	N/A	, Florida	
	(Ciţv)	-	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		h and accept the oblivations	s of the position
The transfer of the speciment of tegran		iisoopi me oonganons	-y position.
Sig	nature of New Registered Ag	ent, 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Melissa Malara	5640 NW 120 Terr
Add			Coral Springs, FL 33076
Remove			
2) Change			_
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del>	_	
Add			
Remove			
5) Change			
Add			
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о П ст			
6) Change		_	_
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
Ά	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Adment if not contained in the amendment tracm.
'A	
<del></del>	
-	

The date of each amendment date this document was signed.	(s) adoption: March 1, 2014	, if other than the
-	N/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	c approved by the shareholders through voting groups. The following statement d 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		
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
<sub>Dated_</sub> 3/1/	14	
Signature	Wild Melan	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Wilda Malara	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	<del></del>

FILED

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SECRETARI OF STATE