P10000030016

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
. (Bu	siness Entity Nan	ne)
·, (Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Amend + N/C
TBrown 2/24/11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	RPORATION: AGBARA TRADING COMPANY, INC.			
DOCUMENT NU	MBER:	P10000030016		
The enclosed Artic	cles of Amendment	and fee are subm	nitted for filing.	
Please return all co	orrespondence conc	erning this matte	r to the following:	
	101 		OLALEKAN	
		Name of C	ontact Person	
		BARA TRADIN	IG COMPANY, INC.	
Firm/ Company				
		12304 NW	7TH AVENUE	_
		Ad	ldress	
		MIAMI,	FL 33168	
•		City/ State	and Zip Code	
	E-mail address	al_mayungbe@ : (to be used for futu	yahoo.com re annual report notification)	
For further information	ation concerning thi	is matter, please o	call:	
OLA	LEKAN OGBARA	at	(754)	245-0231
Name	of Contact Person		Area Code & Daytime T	elephone Number
Enclosed is a checl	k for the following	amount made pay	able to the Florida Depa	artment of State:
☑ \$35 Filing Fee	\$43.75 Filing For Certificate of St	tatus	\$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 Amendment Section Division of Corporations P.O. Box 6327		Ar Di	reet Address nendment Section vision of Corporations ifton Building	
Tallahassee, FL 32314			61 Executive Center Cir Ilahassee, FL 32301	cle

Articles of Amendment to **Articles of Incorporation**

AGBARA TRADING COMPANY, INC.

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

P10000030016

(Document Number of Corporation (if known)

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TAILAHASSEE, FLORIO

ING COMPANY, INC	
esignation "Corp," "Inc	"company," or "incorporated" or th ," or "Co". A professional corporatio the abbreviation "P.A."
able:	
istered office address in	n Florida, enter the name of the
(Florida street a	ddress)
(Florida street a	ddress), Florida (Zip Code)
	esignation "Corp," "Inc ssional association," or able: ADDRESS) BOX

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
PRES	AGABRA, OLALEKAN	12304 NW 7TH AVENUE MIAMI FL 33168	
PRES	OGABRA, OLALEKAN	12304 NW 7TH AVENUE MIAMLEL 33168	
			- n
	ding or adding additional Articles, en dditional sheets, if necessary). (Be sp		
F. If an ar	nendment provides for an exchange,	reclassification, or cancellation of	issued shares,
<u>provisu</u> (if n	ons for implementing the amendment of applicable, indicate N/A)	if not contained in the amendmer	<u>it itself:</u>
N/A			
	7 - M _a ja I - _{Mari}		

The date of each amendmen	t(s) adoption: 12	2/29/2010
Effective date <u>if applicable:</u>	12/29/2010	(date of adoption is required)
	(no more than !	90 days after amendment file date)
Adoption of Amendment(s)	(CI	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s approval.
		he shareholders through voting groups. The following stateme. g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amer	ndment(s) was/were sufficient for approval
by		
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	e board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	e incorporators without shareholder action and shareholder
Dated_12/2	9/2010	
Signature _	Olalik	Delum
sele	ected, by an incor	dent of other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		OLALEKAN OGBARA
	(Ту	ped or printed name of person signing)
		PRESIDENT
	(Title o	of person signing)