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JUN 21 2017

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: AGRESA INTERNATIONAL INC. DOCUMENT NUMBER: P11000059885 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JULIANA SANGURIMA Name of Contact Person JULIANA SANGURIMA Firm/ Company 3533 W 93 RD PL Address HIALEAH FL 33018 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 8055988 Area Code & Daytime Telephone Number JULIANA SANGUARIMA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee **□\$43.75** 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

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

AGRESA INTERNATIONAL INC

(Name of Corporation as currently	filed with the Florida Dept, of State)
P 11000059885	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Fl its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviction "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	t address)
New Registered Office Address:	, Florida
(6	'ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.
Signature of New Res	ristered 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)

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	<u>PT</u>	<u>John Doe</u>	
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	D-VP	JULIANA SANGUARIMA	10084 NW 88 TER
Add			DORAL FL 33178
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kemove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Remove			

Attach additional above	g additional Articles, enter change(s) here: ts, if necessary). (Be specific)
хиасп <i>аааннониі shee</i>	ь, у песехматуу. — (Бе кресунс)
· · · · · · · · · · · · · · · · · · ·	
	
·	
<u>t an amendment pro</u>	vides for an exchange, reclassification, or cancellation of issued shares,
provisions for imple	nenting the amendment if not contained in the amendment itself: , indicate N/A)
(if not applicable	, indicate N/A)

The date of each amendment(s) addate this document was signed.	pption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as that artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were sul	ted by the shareholders. The number of votes east for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes east i	or the amendment(s) was/were sufficient for approval
by	MA
	(voting group)
☐ The amendment(s) was/were adopaction was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	ted by the incorporators without shareholder action and shareholder
DatedO	12/20/7
(By a di selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d tiduciary by that fiduciary)
	ULIANA SANGUARIMA
	(Typed or printed name of person signing)
)- VP
-	(Title of person signing)