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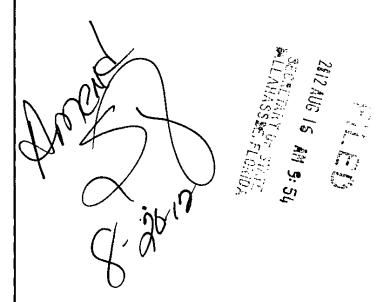
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Commodi	ty Group Inc			
DOCUMENT NUMBER: P12000065	5109			
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this n	natter to the following:			
BRIAN CASTILI	LO			
	Name of Contact Person	1		
COMMODITY G	ROUP INC			
	Firm/ Company			
901 SW 8 CT	•			
	Address			
MIAMI FL 33130				
	City/ State and Zip Code			
SPACEJAMS2323(
E-mail address: (to be	used for future annual report	notification)		
For further information concerning this matter, plo	ease call:			
BRIANCASTILLO	at (305	, 5226915		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount mad	le payable to the Florida Depa	artment of State:		
\$35 Filing Fee	_	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment Articles of Incorporation of



COMMODITY GROUP INC

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

P12000065109

mendment(s) to

(Documer	nt Number of Corporation (it	i known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corpord	ution adopts the following a	amendm
A. If amending name, enter the new na	nme of the corporation:		a	n.
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional o	incorporated" or the abb	The new previation portain th
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		REMAINS	THE SAME	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		REMAINS	THE SAME	
D. If amending the registered agent an	d/or registered office address	race in Flarida, antar i	the name of the	
new registered agent and/or the new	v registered office address	:	the name of the	
Name of New Registered Agent	BRIAN CASTILL	. O		
Nume of New Registered Figure	901 SW 8 CT			
	(Florida str	eet address)		
New Registered Office Address:	MIAMI		Florida 33130	
<u>New Registerea Office Adaress</u> :	(City)	, ·	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:		_	
I hereby accept the appointment as regist	ered agent. Tym familiar v	vith and accept the obl	igations of the position.	
(X)	1/5 W	\mathcal{M}		
Si	gnati lie of N ew Registered A	gent 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	PT	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	Р		ALEJANDRO CASTILLO	901 SW 8 CT
Add				MIAMI FL 33130
X Remove				
2) Change	SECI	R	BRIAN CASTILLO	901 SW 8 CT
Add				MIAMI FL 33130
X				
3) Change	Р		BRIAN CASTILLO	901 SW 8 CT
X		_		MIAMI FL 33130
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Chango				
6) Change				-
· Add				
Remove				

amending or addir ttach additional she	ets, if necessary).	(Be specific)			
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an amendment pro rovisions for imple	menting the amer	ange, reclassifica	ation, or cancell ntained in the a	lation of issued mendment itse	shares, lf:
(if not applicable	z, indicate N/A)				
	r 3 				
					

The date of each amendment(s)) adoption: 08-13-2012
Effective date <u>if applicable</u> :	08-13-2012
Enterire date in apprication	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 08-1	3-2012
Signature Signature	A MILLONIA
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
արթ	
	ALEJANDRO CASTILLO
	(Typed or printed name of person signing)
	OLD PRESIDENT
	(Title of person signing)