Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000274357 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : FILEMAN LAW FIRM, P.A.

Account Number : 120080000057 Phone : (941)833-5560 Fax Number : (941)833-5557

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

G FILEMAN @ FILEMANLAW.COM.

COR AMND/RESTATE/CORRECT OR O/D RESIGN S/C OF SARASOTA INC.

Certificate of Status Certified Copy 0 Page Count 05 Estimated Charge \$35.00

Electronic Filing Menu Corporate Filing Menu

Heip OCT 1 9 7017 **等/ 海州河山**沙

H17000274357 3

COVER LETTER

 \mathcal{D}_{χ}

TO: Amendment Section Division of Corpo						
NAME OF CORPOR	ATION:	<u>L of SCHAND</u> DONG 64085	7a. Inc			
DOCUMENT NUMB	er: <u>P13U</u>	<u> 1000/64086</u>				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	pondence concerning this ma	-				
-	5alvá	Name of Contact Parson	menti			
Name of Contact Agricon						
-	S/C. of Sarasola Inc					
	1331 5 SUMPLE BOWLEVALS					
•	1,	Address				
	Nort	h Port Flor	ZIDA 34287.			
·	City/ State and Zip Code					
GFILEMAN C FILEMANIAW. COM.						
E-mail address: (to be used for future annual report notification)						
For further information	concerning this matter, pleas	se call:				
1 -	 /) -					
Salvator	i agginecti	at (732	768 - 4910 de & Daytimo Telephone Number			
Name o	of Contact Person	Area Co	de & Daytimo Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	US52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mail	ling Address	Street	Address			

Amendment Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

		H17000274357 3
Article	es of Amendment	
Articles	to of Incorporation	
1	of A.	
5/c m 3	5 orasota An	16
	irrently filed with the Florida I	Pept. of State)
<i>P1300</i>	000 64085	
(Document Nuc	mber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporatio	π adopts the following amendment(s) το
A. If amending name, enter the new name of the corporation of the corp	ion: N/A	The arm
name must be distinguishable and contain the word "corp" "Corp" "Inc" or Co.,." or the designation "Corp" "Inc., word "chartered," "professional association," or the abbravia B. Enter new principal office address. ([applicable: (Principal office address MUST BE A STREET ADDRESS)	," or "Co". A professional con lation "P.A." N/A	orporated" or the abbreviation poration name must contain the
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX)</u>	N/A.	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		name of the
Name of New Registered Agent		
Fia	orida street address)	
	nuo siree. www.essy	
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		tions of the position. - ;
Signature of	f New Registered Agent, if change	
	Page 1 of 4	OI

H17000274357 3

H170002743573

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 = Sacretary; 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 Do	De .			
X Remove	<u>v</u>	Mike Jo	ones.			
X Add	<u>sv</u>	Sally St	nith			
Type of Action (Check One)	<u>Title</u>		Name		Address	
i)Change	\mathcal{L}	_ _	CARLUTZA, CHRISTO,	<u>PHB</u> C A.	1321 S. Sumtes B North Part, LL	/vd.
Add Remove					<u>- Morth Part, FL</u> 34287	
2)Change	P	<u> </u>	<u>Salvatore Aggine</u>	rte	13215. Sumter B	slud
Add			•		4/81Ch 101+, FL 34287	7
Remove 3) Change						
Add						
Remove						
4) Change		_				
Add Remove						
5) Change						
Add						
Remove						
6) Change		_				
Add						
Remove						

Page 2 of 4

f amending or adding additional Art Attach additional sheets, if necessary).	. (Be specific)
	N/P
	
	
· · · · · · · · · · · · · · · · · · ·	
	<u> </u>
f an amandmant moradas for an ara	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	1
	N/A
· 	
······································	
·	

The date of each amendment(s) adoption: _	October 18 2017	H17000274357 3 if other than th
date this document was signed.	(7000701 # 1 (1)7	II OUICI CAR III
Effective date if applicable:	October 18,2017 October 18,2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as th
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient fo	ne sharebolders. The number of votes cast for the amend or approval.	iment(s)
	the shareholders through voting groups. The following ing group entitled to vote separately on the amendment(
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by	.,,	
6	roting group)	
The amendment(s) was/were adopted by the action was not required.	ne board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the action was not required.	ne incorporators without shareholder action and shareho	lder
Dated Octob	ec 18,2011	
Signature	M. (328	
(By a director, fr	esident or other officer Verrectors or officers have no ocorporator - if in the bands of a receiver, trustee, or other	ot been
	scorporator – it in the dames of a receiver, trustee, or our arry by that fiduciary)	ier court
	HICISTUPHETE. A. LARROZZI (Typed or printed name of person signing)	7
	(Typed or printed name of person signing)	
/	PRESIDENT	
	(Title of person signing)	