P14000009108

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100278038981

15 OCT 13 AH 7: 12

2015 OCT 13 PM 2: 14

OCT 1.4 2015

CORPORATION SERVICE COMPANY 1201 Hays Street

__ PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 829516 7777916	5			
AUTHORIZATION: Spelle Ran	,			
COST LIMIT : \$43.75				
ORDER DATE : October 13, 2015				
ORDER TIME : 11:46 AM				
ORDER NO. : 829516-005				
CUSTOMER NO: 7777916				
DOMESTIC AMENDMENT FILING				
NAME: AGI ACQUISITION, INC.				
2				
EFFECTIVE DATE:				
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CEPTIFIED CODY				

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AGI Acquisition,	Inc.		
DOCUMENT NUMB				
	of Amendment and fee are su	ıbmitted for fili	ng.	
Please return all corres	pondence concerning this ma	itter to the follo	wing:	
	Quentin Lynch			
-		Name of Co	ontact Persor	1
	FisherBroyles, LLP			
-		Firm/ (Company	
	19 Hilliard Street SE, #8			
-		Ad	dress	
	Atlanta, GA 30312			
- -		City/ State a	and Zip Code	2
quenti	n.lynch@fisherbroyles.com			
<u>, </u>	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information	concerning this matter, pleas	se call:		
Quentin Lynch		at (404	625-1904
Name o	f Contact Person	ar (Агеа Со) 625-1904 de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the l	Florida Depa	rtment of State:
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Fil Certified ((Additiona enclosed)	Сору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address				Address
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

y filed with the Florida Dept. of State)
f Corporation (if known)
Florida Profit Corporation adopts the following amendment(s)
The new
n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
- 15 OC
ress in Florida, enter the name of the
eet address)
, Florida
(City) (Zip Code)
7

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>	John Do	<u>oe</u>	
\underline{X} Remove	V	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		-
Add				<u> </u>
Remove				
2) Change		_		
Add				
Remove				
3) Change	····			
Add				
Remove				
4) Change		·		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	.
	Determine
	ange, reclassification, or cancellation of issued shares, odment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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" (vating group)	
(vating group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By splittector, president or other officer – if directors or officers have not been	
(By edirector, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
YVES BARRETTE	
(Typed or printed name of person signing)	
President	
(Title of person signing)	