P14000024659

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14 MAY -1 AM II: 37 SECRETARY OF CHAIR FALL ANA SSEED FE ORIDA

C. LEWIS

MAY 1 3 2014

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	_{ON:} FIRST COM	MODITIES TR	ADING CORP		
DOCUMENT NUMBER:	P14000024659	9			
The enclosed Articles of Art					
Please return all correspond	ence concerning this mat	ter to the following:			
RA	FAEL MOROS	,			
		Name of Contact Person	1		
FIRST COMMODITIES TRADING CORP					
		Firm/ Company			
19	199 FLAGER STREET SUITE 890				
. 	Address				
MI	MIAMI, FL 33131				
		City/ State and Zip Cod	e		
DDMA	RT12@GMAIL	COM			
F F 1V1/-	_	ed for future annual report	notification)		
	2 man address. (10 00 ac		,		
For further information con	cerning this matter, pleas	e call:			
PABLO MARTIN	NEZ	786	344-4322		
	ntact Person	at (ode & Daytime Telephone Number		
			·		
Enclosed is a check for the	following amount made p	bayable to the Florida Dep	artment of State:		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amendm Division P.O. Box	Address ent Section of Corporations : 6327 see, FL 32314	Amen Divisi Cliftor 2661 1	Address dment Section on of Corporations n Building Executive Center Circle lassee, FL 32301		

APPECATE AND FILES

Articles of Amendment Articles of Incorporation

14 MAY - 1 AH 11: 37

FIRST COMMODITIES TRADING CORP

SECRETARY OF UTALL ADLAHASCELFLORIDA

P14000024659	urrendy med with the Pio	indu Dept. of State	
(Document	Number of Corporation (if k	nown)	_
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this FI	orida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new nar	ne of the corporation:		
N/A			The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associati	ation "Corp," "Inc," or "Co	" "company," or "incorporated" or the a o". A professional corporation name must A."	bbreviation contain the
		N/A	
B. Enter new principal office address, is (Principal office address MUST BE A ST	<u>REET ADDRESS</u>)		_
			_
			-
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	_
			_
			_
D. If amending the registered agent and	d/or registered office addre	ss in Florida, enter the name of the	
new registered agent and/or the new	N/A		
Name of New Registered Agent	11//		
	(Florida stree	et address)	
New Registered Office Address:		, Florida(Zip Code)	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if ch	nanging Registered Agent:	or and the desired and the	
I hereby accept the appointment as registe	ered agent. I am familiar wi	ith and accept the obligations of the position.	

Signature of New Registered 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Iones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	·VP	ALFREDO LOVERA	199 FLAGER ST 890
Add			MIAMI, FL 33131
Remove			
2) Change	VP	JHONATHAN JPONTON RUIZ	199 FLAGER STREET 890
Add			MIAMI, FL 33131
Remove			
3) Change			
Add			
Remove			
4) Change			
Ádd			
Remove			
5) Change			
Add			:
Remove			
romore			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).					
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		<u> </u>	<u> </u>		
f an amendment provides for an exc	hanse reclass	rification or a	rancellation	nf issued sha	rec .
provisions for implementing the am-	endment if no	t contained in	the amendi	nent itself:	1 131
(if not applicable, indicate N/A)					
A		<u>-</u> .			
-					
				- -	<u> </u>
			·		



The date of each amendmen	(s) adoption: 4/21/2014	14 MAY - 1 AM II: 38	if other than the		
date this document was signed		SECKETARY OF THE TALLAHASSEE, FECTOR			
Effective date if applicable:		(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(<u>CHECK ONE</u>)				
	re adopted by the shareholders. The nuere sufficient for approval.	umber of votes cast for the amendment(s)			
The amendment(s) was/we must be separately provide	re-approved by the shareholders throug ed for each voting group entitled to vot	th voting groups. The following statement te separately on the amendment(s):			
"The number of vote	s cast for the amendment(s) was/were s	sufficient for approval			
by	(voting group)	,n			
The amendment(s) was/we action was not required.		ithout shareholder action and shareholder			
The amendment(s) was/we action was not required	ere adopted by the incorporators withou	ut shareholder action and shareholder			
Dated_ 4/2	1/2014				
Signature_					
(By a director, president or other officer	r - if directors or officers have not been nands of a receiver, trustee, or other court			
	RAFAEL MOROS				
	(Typed or pri	nted name of person signing)			
	PRESIDENT				
	(Title	of person signing)			