P16000012317

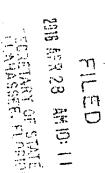
(Re	questor's Name)	
(Ad	dress)	
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John Alson

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	coagro corp		
DOCUMENT NUM	P16000012317 BER:		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Jesus Alberto Kauam		
		Name of Contact Person	1
	COAGRO CORP	. vamo or contact r orso.	•
		Firm/ Company	
	175 Fontainebleau Blvd		
		Address	
	Miami, Fl, 33172		
		City/ State and Zip Cod-	е
arlf1	11@outlook.com		
_	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Jesus Alberto Kauam		954 at (8602681
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	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)
Ma	iling Address	Street	Address
Am	endment Section	Amendment Section	
Division of Corporations			on of Corporations
	. Box 6327		Building
i aii	ahassee, FL 32314	2061 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

COAGRO CORP			
P16000012317	of Corporation as currently	filed with the Florida Dept. of Stat	<u>e</u>)
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:		
		······································	The new
name must be distinguishable and com. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa B. Enter new principal office address, (Principal office address MUST BE A S.	ation "Corp," "Inc," or "C tion," or the abbreviation "P if applicable:	o". A professional corporation nan	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of			10 TO
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the	
Name of New Registered Agent	Jesus Alberto Kauam		
Nume of the Wegistered Agent	175 Fontainebleau Blvd		
	(Florida stree	et address)	
New Registered Office Address:	Miami	, Florida	33172
	((City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar wi	th and accept the obligations of the p Gistered Agent, if changing	osition.

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 Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
X Change	S	Jesus Alberto Kauam	175 Fontainebleau Blvd
Add			Miami, FL, 33172
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)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

04/11/16	
	if other than the
date this document was signed.	
04/11/16	
Effective date if applicable: (no more than 90 days after amendment file 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.	t be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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 inust 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	
(voting 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.	
04/11/16 Dated	
Signature	
Signature (By a director, 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)	
Jesus Alberto Kauam	
(Typed or printed name of person signing)	
Secretary	

(Title of person signing)