# P:16000013120

(Re	equestor's Name)	
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# **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CENTRAL AM	ERICAN AGRONOMY I	NTERNATIONAL, INC	
DOCUMENT NUMBER:	P16000013180			
The enclosed Articles of Amenda	nent and fee are su	ibmitted for filing.		
Please return all correspondence	concerning this ma	atter to the following:		
	RC	DSALIO SEBASTIAN-GO	NZALEZ	
	Name of Contact Person			
	CENTRAL AMERICAN AGRONOMY INTERNATIONAL, INC			
	Firm/ Company			
	2234 49TH DRIVE N.			
	Address			
	WEST PALM BEACH, FL 33417			
		City/ State and Zip Cod	e	
	,š	ALLCORPS123@GMAIL.C	COM	
E-mar	l address: (to be u	sed for future annual report	notification)	
For further information concernin	,	se call:  at (		
Name of Contact I	Person		de & Daytime Telephone Number	
Enclosed is a check for the follow	ing amount made	payable to the Florida Depa	artment of State:	
	75 Filing Fee & ificate 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)	
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Ameno Divisio Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle assec, FL 32301	

### **Articles of Amendment**

# to Articles of Incorporation

# CENTRAL AMERICAN AGRONOMY INTERNATIONAL, INC

(Name of Corporation as currently	filed with the H	ortida Dort. de State)
P16000013	180	المجال المستحيد المحسن الراب
(Document Number of C	orporation (if ki	iown) o, Florida
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Cor	poration adopts the following amendment(s
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professio.	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office addressed new registered agent and/or the new registered office address:	ss in Florida, en	ter the name of the
Name of New Registered Agent		
	<del></del>	
(Florida stree	( adaress)	
New Registered Office Address:	ity)	, Florida
	• •	(vip some
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit	h and accept the	obligations of the position.
Signature of New Reg	istered 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 <math>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 Joh	un Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	DANITA ENEDINA SANCHEZ	2234 49th Drive, N
X Add		<del> </del>	WEST PALM BEACH, FL 33417
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<del>-</del>	
· ·	
· ·	
<del> </del>	
****	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
<del></del>	

The date of each amendment(s) adoption:	, if other than the
date inis document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
(voing 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.	
01/06/2018 Dated	
Signature Tosulo	
(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)	
ROSALIO SEBASTIAN-GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	