

P160000017077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

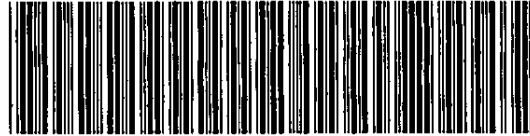
(Business Entity Name)

(Document Number)

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16 JUN -3 PM 3:06
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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MAY 19 2016
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2016

ANDREW OBEIDY
AGAIA, INC.
200 E. BROWARD BLVD., SUITE 1150
FORT LAUDERDALE, FL 33301

SUBJECT: AGAIA COMMERCIAL BRANDS, INC.
Ref. Number: P16000017077

We have received your document for AGAIA COMMERCIAL BRANDS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 616A00010657

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JUN -3 PM 3:06

RECEIVED
16 JUN -3 PM 3:22
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

FILED
16 JUN -3 PM 3:06
DIVISION OF CORPORATIONS

NAME OF CORPORATION: Agaia Commercial Brands, Inc.
DOCUMENT NUMBER: P16000017077

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andrew Obeidy

Name of Contact Person
Agaia, Inc.

Firm/ Company
200 E. Broward Blvd. Suite 1150

Address
Fort Lauderdale, FL 33301

City/ State and Zip Code

andrew@agaiainc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Obeidy at (954) 366-7200

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|--|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Articles of Amendment
to
Articles of Incorporation
of

Agaia Commercial Brands, Inc.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JUN -3 PM 3:06

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000017077

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

Not Applicable

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

Not Applicable

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Not Applicable

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with 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.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>D</u>	<u>Benjamin Shell</u>	<u>200 E. Broward Blvd. Suite 1150</u>
<input type="checkbox"/> Add			<u>Fort Lauderdale FL 33301</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>CEO</u>	<u>Mike Linn</u>	<u>200 E. Broward Blvd. Suite 1150</u>
<input checked="" type="checkbox"/> Add			<u>Fort Lauderdale FL 33301</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>P</u>	<u>Christopher Shell</u>	<u>200 E. Broward Blvd. Suite 1150</u>
<input checked="" type="checkbox"/> Add			<u>Fort Lauderdale FL 33301</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>VP</u>	<u>Matthew Shell</u>	<u>200 E. Broward Blvd. Suite 1150</u>
<input checked="" type="checkbox"/> Add			<u>Fort Lauderdale FL 33301</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>T</u>	<u>Bob Lee</u>	<u>200 E. Broward Blvd. Suite 1150</u>
<input checked="" type="checkbox"/> Add			<u>Fort Lauderdale FL 33301</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>S</u>	<u>A. Andrew Obeidy</u>	<u>200 E. Broward Blvd. Suite 1150</u>
<input checked="" type="checkbox"/> Add			<u>Fort Lauderdale FL 33301</u>
<input type="checkbox"/> Remove			

Not Applicable

Not Applicable

Not Applicable

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Not Applicable

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 be listed as the document's effective date on the Department of State's records.

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 _____."
(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.

May 11th, 2016

Dated

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)

Benjamin Shell

A. Andrew OBeidy
(Typed or printed name of person signing)

Chairman

Secretary

(Title of person signing)