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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Agricultural and E	invironmental Applied Scie	nces Inc.			
DOCUMENT NUM	D17000037677					
The enclosed A <b>rticle</b>	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Colin Cave					
	Name of Contact Person  Firm/ Company					
	320 NE 69 Circle					
	Address					
	Boca Raton Florida 33487					
		City/ State and Zip Cod	e			
coli	ncave@caveisland.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
Colin Cave		561 at (	9894426			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check t	for 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)			
Mailing Address Amendment Section			Address Iment Section			
•	vision of Corporations	Divisio	on of Corporations			
	D. Box 6327 Clifton Bu					
Ia	Hahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

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Agricultural and Environmental Applied Sciences Inc. SPYREIGRY OF SERIE (Name of Corporation as currently filed with the Florida Dept. of State) [ On BA P17000037677 (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." 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) 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: Colin Cave Name of New Registered Agent 320 NE 69 Circle (Florida street address) Boca Raton Florida New Registered Office Address: (City) 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

•				1
address of each Office (Attach additional sheet Please note the officer/d P = President; V = Vice Executive Officer; CFC held. President, Treasu Changes should be note a change, Mike Jones le Mike Jones, V as Remov	r and/or I. s, if neces, lirector title Presiden = Chief i rer, Direct d in the fo	Director I sary) le by the J t; T= Tre Financias or would dlowing r corporatio	being added: first letter of the office title: easurer: S= Secretary; D= Director; S Officer. If an officer/director holds be PTD, nanner. Currently John Doe is listed o on, Sally Smith is named the V and S.	TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John D	<u>oc</u>	
X Remove	$\underline{\mathbf{y}}$	Mike J	ones	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	CFO: I	D;5	Colin Cave	320 NE 69 Circle
x Add				Boca Raton
Remove				Florida 33487
2) X Change	P; D <b>;</b>	7	Mihaela Mahoney	12316 Wedge Way
Add				Boynton Beach
Remove				Florida 33437
3) Change				
Add		<del>-</del>		
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		<del></del>		
Remove				
Kellove				
6) Change		_		
Add				

\_\_ Remove

famending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
<del></del>	
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

October 12 2017	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.  October 15 2017	
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 d document's effective date on the Department of State's records.	ate will not be listed as th
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(by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east 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 sharehold action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
October 12 2015 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 cou appointed fiduciary by that fiduciary)	
(Types of printed name of person signing)	
President	
(Title of person signing)	