## PRODUCTIS

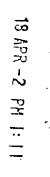
Office Use Only



300311376203

04/03/18--01005--010 \*\*52.50

R. WHITE
APR 0 4 2018



## **COVER LETTER**

•

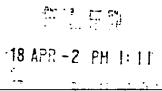
?

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LAGI, INC		
DOCUMENT NUM	IBER: P18000026715		
The enclosed Article	s of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	Jesse Tarr		
	-	Name of Contact Person	
	IAGI, INC		
		Firm/ Company	
	5202 Crossfield Ct # 8		
		Address	·
	Rockville, MD 20852		
		City/ State and Zip Code	
jess	e@citypermit.us		
_	E-mail address: (to be u	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Jesse Tarr		at (	261-8765
Name	of Contact Person		le & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Āi Di P.	ailing Address nendment Section vision of Corporations D. Box 6327 Illahassee, FL 32314	Amendi Divisio Clifton	Address ment Section n of Corporations Building kecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



IAGI, INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000026715	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
R. Enter now principal office address if applicables	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	1977
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address.	
N/A Name of New Registered Agent	
Name of New Registerea Agent	
(Florida )	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(only) (only)
New Registered Agent's Signature, if changing Registered Agen	ıt:
I hereby accept the appointment as registered agent. I am familian	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.

X Change	<u>PT</u> <u>Joh</u>	<u>nn Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	<u>s</u>	Sharon Banks-Tarr	6816 Renita Ln
Add			Bethesda, MD 20817
X Remove			<del></del>
2) X Change	COO/S	Vanessa Bastos	3601 SW 117th Ave #9-108
Add			Miami, FL 33175
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u>-</u> _
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

	n additional sheet	ts, if necessary).	(Be specific)	e(s) here:			
/A							
		<del></del>					
				<del></del>	<del></del>	<del> </del>	
					<u> </u>		
						<del></del>	
			<u></u>			<del>-</del> -	
	<u> </u>						
	• •						
If an a	amendment prov isions for impler	vides for an excha menting the amen	nge, reclassifica dment if not cor	ition, or cancella itained in the an	<u>ition of issued st</u> nendment itself:	nares,	
(	if not applicable,	indicate N/A)					
'A							
							. =
_							

date this document was signed.	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed a spartment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were add by the shareholders was/were se	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	-processy and messaperation without some sound and management of
Dated 3/2	29/2018 22112
Signature	
	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
uppoin	ted fiduciary by that fiduciary)
	Jesse Tarr
	(Typed or printed name of person signing)
	CEO/Director
	(Title of person signing)