## P20000026697

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(Ci	ty/State/Zip/Phon	e #)
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2022 FEB - 9 PM 4: 50 SECRETARY OF STATE TALLAHASSEE, FL

Amend

FEB 18 2022 I ALBRITTON

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TO: Amendment Se Division of Cor		*	•	\$ <b>*</b>
NAME OF CORPO	DRATION: AGREEMO INC			
DOCUMENT NUM	IBER: P20000026697			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	Gabriel Bahash			
		Name of Contact Person	า	
	Agreemo Inc			
		Firm/ Company		
	1034 Gateway Blvd #107			
		Address		
	Boynton Beach FL 33426			
		City/ State and Zip Code	:	
	gabriel@agreemo.com			
	E-mail address: (to be us	sed for future annual report	notification)	<del></del>
For further informati	on concerning this matter, pleas	se call:		
Gabriel Bahash		a1 ( <u>561</u>	350-0657	
Name	of Contact Person	Area Coo	de & Daytime Tele	phone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of S Certified Copy (Additional Co is enclosed)	Status '

Mailing Address
Amendment Section
Division of Corporations

P.O. Box 6327

Street Address
Amendment Section

Division of Corporations

The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

of	r	
AGREEMO INC		
(Name of Corporation as currently	y filed with the Florida Dept. of State)	40-40
P20000026697		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the fol	liowing 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 "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name must of	
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)		FILED SECRETARY OF STA
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	LE 0
Name of New Registered Agent		
(Florida stre	vet address)	
New Registered Office Address:	(City) Florida_	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	: vith and accept the obligations of the pos	ition.

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)

Example:

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	PT	John Doe	
X Remove	$\underline{Y}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 + Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	M/A	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate W/A)  greemo inc is amending Article IV Shares of the original amendment from 200 shares to 10,000,000 shares		
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		
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	provisions for implementing the amendment if not contained in the amendment itself:	
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		_

The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date if applicable:		
-	(no more than 90 days after amendment file date)	<del></del> ,
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, thi artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmicient for approval.	ent(s)
☐ The amendment(s) was/were appro-	oved by the shareholders through voting groups. The following statech voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
1/18/2022 Dated		
<del></del>	and But	
selected,	ctor, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other of I fiduciary by that fiduciary)	en
G	abriel Bahash	
~	(Typed or printed name of person signing)	
C	hief Executive Officer	
_	(Title of person signing)	