Florida Department of State

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Division of Corporations

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COVER LETTER

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AE AGRIBIOLOG	GICALS NA CORP	<u></u>
3000033164		
<i>lment</i> and fee are su	bmitted for filing.	
concerning this ma	tter to the following:	
LE WILLIAMS		
	Name of Contact Per	Son
GLOBAL GROUP.	INC.	
	Firm/ Company	
74 COURT, SUITI	E 1406	
	Address	
FL 33156		
	City/ State and Zip C	ode
v@demosalobal es		
	ed for future annual rep	ort notification)
ing this matter, pleas	se call:	
	at (6700979
Person	Area	Code & Daytime Telephone Number
wing amount made	payable to the Florida D	epartment of State:
_	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	© \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
ection orporations	Ame Divi The	ret Address condinent Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, Ft. 32303
	and fee are sure concerning this manual the will hams. LE WILLIAMS GLOBAL GROUP. 74 COURT, SUITE FL 33156 w@demosglobal.es ail address: (to be us ing this matter, please	Ament and fee are submitted for filing. In concerning this matter to the following: Concerning this matter to the following: Concerning this matter to the following: Concerning this matter for the following: Concerning this matter for Company for Address

To:

H230002833993

Articles of Amendment to Articles of Incorporation of

and the control of th

AE AGRIBIOLOGICALS NA CORP (Nums of Cornoration a	as currently filed with the F	lorida Dept. of State)	
P23000033164			
(Document	Number of Corporation (if k	novn)	
Pursuant to the provisions of section 607,1006, Florida Stats Articles of Incorporation:	ntutes, this <i>Florida Profit Con</i>	rporation adopts the following am	endment(s)
A. If amending name, enter the new name of the corpo	<u> 2ration:</u>		زسا
ame must he distinguishable and contain the word "corpo Inc.," or Co.," or the designation "Corp," "Inc.," or chartered." "professional association," or the abbrevian	"Co". A projessional coi	The orporated" or the abbreviation "Corporation name must contain the	Corp ."
3. Enter new principal office address, if appticable: Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>		
			· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent	office address in Florida, en ce address;	iter the name of the	·
ſ	(Elorido sireet address)		
New Registered Office Address:	Cin4	, Florida (Zip Code)	
ew Registered Agent's Signature, if changing Register hereby accept the appointment as registered ogent. I om		obligations of the position.	
Signature	of New Registered Agent, if	changing	
Theck if applicable The amendment(s) is/are being filed pursuant to s. 607.0	0120 (11) (e), F.S.		

From Demos Global Group, S.L.

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, Treusurer, 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, P.F. as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: \(\sum_C \text{Change}\)	<u>P1</u>	John D <u>o</u> s		
X Remove	<u>Y</u>	Mike Jones		
\underline{X} Add	<u>sv</u>	Sally Smith		,
<u>Expe of Action</u> (Check One)	<u> 750e</u>	Name	Address	
1) Change	VP	LUCIE LAGARDE	8950 SW 74 COURT	
X Add			SUITE 1406	
Remove			MIAMI, FL 33156	
2) Change				~ ~
Add				
Remove 3) Change	****			_ _
Add				
Remove				_
4)Change			****	
Add				
Remove				t-fit-um
5) Change				
Add				
Remove				_
6)Change				
Add				
Remove				

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E. If amending or additional Articles, enter change(s) here: (Attach additional thecis, if necessary). (Be specifie)	
(Attach additional sheets, if necessary). (Be specifie)	
	,
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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 NA)	
	······································
	····

To;

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The date of each amendment(s)	adoption:	, if other than the
tate this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this Jocument's effective date on the I	block does not meet the applicable statutory fitting requirements, this date we department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as action was not required.	dopted by the incorporators, or board of directors without shareholder action ar	d shareholder
The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
E) The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cu-	a for the amendment(s) was were sufficient for approval	
ъу	(voting group)	.0
Dated	13/07/2323	
elfy a selec	director, president or other officer — if directors or officers have not been ed, by an incorporator — if in the hands of a receiver, trustee, or other countred fiduciary by that fiduciary)	
	NICOLAS FILLON	
	(Fyped or printed name of person signing)	
	PRESIDENT 1	
	(Tale of person signing)	