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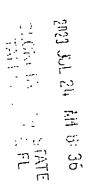
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

Amendment Section Division of Corporations

Taffahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	RATION: AE AGRIBIOLOG	GICALS NA CORP				
DOCUMENT NUMBER: P23000033164						
The enclosed Articles of Amendment and tee are submitted for filing.						
Please return all corre	espondence concerning this ma	atter to the following:				
	MICHELLE WILLIAMS					
		Name of Contact Persor	1			
	DEMOS GLOBAL GROUP.	, INC.				
		Firm/ Company				
	8950 SW 74 COURT, SUITE 1406					
	Address					
	MIAMI, FL 33156					
	City/ State and Zip Code					
	michellew@demosglobal.es E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, plea	se call:				
MICHELLE WILLIA	AMS	at (6700979			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ma	iling Address	Street.	Address			

Amendment Section

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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Articles of Amendment to Articles of Incorporation of

AE AGRIBIOLOGICALS NA CORP

AE AGRIBIOLOGICALS NA CORP	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P23000033164	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendo its Articles of Incorporation:	ieni(s) to
A. If amending name, enter the new name of the corporation:	
The ne	
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 woll "chartered," "professional association," or the abbreviation "P.A."	
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)	
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:	~3
Name of New Registered Agent	2023 JUL 24
	<u>است</u> ا
(Florida street address)	L/3
	
New Registered Office Address: Florida (City) (Zip Code)	ΞĘ
	့ တု ယ
Now Desire and America Simulature if the mine Desirement America	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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 J.</u>	ohn Doe	
X Remove	<u>v</u> <u>N</u>	<u> 1ike Jones</u>	
X Add	<u>\$V</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
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			10 283
Add			
Remove			
5) Change			
Add			
Remove			<u>π</u>
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
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:	ے
(if not applicable, indicate N/A)	27
	7 (
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	<u> </u>

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The date of each amendment	(s) adoption:	, if other than the
date this document was signed		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	fill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was wen	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s east for the amendment(s) was were sufficient for approval	
hy	(voting group)	
	(voting group)	
Dated	13/07/2023	
Signature		
(F	By a director, president or other officer—if directors or officers have not been elected, by an incorporator—it in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	TWI TWI TIOES
	NICOLAS HILLON	
	(Typed or printed name of person signing)	
	PRUSIDEN I	

(little of person signing)