



**FORM 10A**

**MATERIAL CHANGE REPORT**

*By kdematas at 9:21:57 AM, 2/27/2025*

**Pursuant to Section 64 of the Securities Act, 2012**

1. NAME OF REPORTING ISSUER

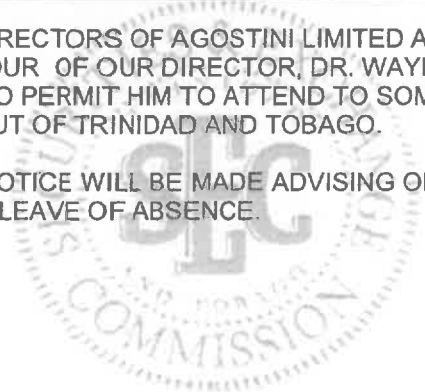
Name of Reporting Issuer
AGOSTINI LIMITED

2. DATE OF MATERIAL CHANGE

Date of material change
FEBRUARY 28, 2025

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change
<p>THE BOARD OF DIRECTORS OF AGOSTINI LIMITED APPROVED A LEAVE OF ABSENCE IN FAVOUR OF OUR DIRECTOR, DR. WAYNE FREDERICK EFFECTIVE MARCH 01, 2025 TO PERMIT HIM TO ATTEND TO SOME PRESSING COMMITMENTS OUT OF TRINIDAD AND TOBAGO.</p> <p>A SUBSEQUENT NOTICE WILL BE MADE ADVISING ON THE END OF DR. FREDERICK'S LEAVE OF ABSENCE.</p>




4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

	YES	NO
Will you be seeking an exemption from publishing a notice in accordance with Section 64(2) of the Securities Act 2012?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "No"

Date of Publication of Notice (dd/mmm/yyyy)	FEBRUARY 28, 2025
--	-------------------

If "Yes"

State the reasons for applying for the exemption


5. DETAILS OF SENIOR OFFICER

Name (First name, Last name)	NADIA JAMES - REYES TINEO
Position in Organization	COMPANY SECRETARY
Business Address	18 VICTORIA AVENUE, PORT OF SPAIN
Work Phone (1-xxx-xxx-xxxx)	1 868 623 4871
Fax Phone(1-xxx-xxx-xxxx)	
Email Address	Nadia.James-Reyestineo@agostinislimited.com

6. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

NADIA JAMES - REYES TINEO      *Nadia Reyes Tineo*      COMPANY SECRETARY      FEBRUARY 27, 2025  
**Print Name**                      **Signature**                      **Position**                      **Date**

**FOR OFFICIAL USE ONLY**

Tool	ID Information
Registrant's Number	
Director's Number	
Document / Record Number	
Record's Management Date Received (dd/mm/yyyy)	

Approved By : \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_