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(Requestor's Name)			
(Address)			
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,			
(City/State/Zip/Phone #)			
(Oity/Otale/21p/) Holie #/			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SUCRETARY OF STATE
TALLAHASSEE, FLORIO/

COVER LETTER

TO: Registration Section Division of Corporations	r '
SUBJECT: POPULCO USA LUC Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ANA MARIA d'EMPAIRE Name of Person	
Poplico WA UC Firm/Company	2012 S4:0
13370 Biscappe Boy Ter	APR 26 APR 26 APR 26 APR 26 APR 26 APR 20 AP
Miami, FL 33181 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
And Maria d'Empaire at (305) 457 - 55 Name of Person Area Code & Daytime Telepho	35 ne Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POPUICO USA (Name of the Limited Liability Co (A Florida Lim	ompany as it now appears of ited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Com Florida document number <u>L12000037709</u> .	pany were filed on Mac	ch 19,2012	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here:		
TRENDKIDS LLC The new name must be distinguishable and end with the words "L.L.C."		" the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applicable:		P (7.	
(Principal office address MUST BE A STREET ADDRES	<u> </u>	E O AAC	₹ T1
		AS A	N prome
		Çn⊙ Hi⊸	formations:
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		JA DA	ÉO.
		·······························	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our shere:	records, enter the	e name of the new
Name of New Registered Agent:	Mind		
New Registered Office Address:			
	Enter Florida street address		
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
~			Add Remove
			Damosto
 			
	-		AddRemove
D. If an	nending any other information, e	nter change(s) here: (Attach additional sheets,	77 6
			ORNIZ.
Dated	April 23rd, 2012	-,	
		of a member or authorized representative of a memb	er
	ANA 1	Typed or printed name of signee	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00