## 114146

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## **COVER LETTER**

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	ON:Trade S	ervices, Inc.	
DOCUMENT NUMBER:	L14146		
The enclosed Articles of Am	nendment and fee are s	ubmitted for filing.	
Please return all corresponde	ence concerning this ma	atter to the following:	
		Sonia Becen	ra
<u></u>		Name of Contact Perso	n
		Swyft Filings	5
		Firm/ Company	
	3 (	Greenway Plaza #1	320
<del></del>		Address	
		Houston, Texas 7	77046
		City/ State and Zip Cod	e
	fi	lings@swyftfilings.d	com
E		sed for future annual report	
For further information conc	erning this matter, plea	se call;	
Sonia Bece		at ( <u>877</u>	<u>777-</u> 0450
Name of Con	lact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made	payable to the Florida Depa	artment of State;
\$35 Filling Fee	l\$43.75 Filing Fee & Centificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ac Amendmen Division of P.O. Box 6. Tallahassee	it Section Corporations 327	Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

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## TRADE SERVICES, INC.

(Name of Corporation as current)	tly filed with the Florida Dept. of State)
L14146	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co" or the designation "Corp.," "Inc," or " word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
,	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7020 J.
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	
Signature of New k	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)

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.

Example:

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VS	DEBORAH L. TORRENCE	4908 SAVARESE CIR
Add			TAMPA, FL 33634
X Remove			
2) Change	P 	Joseph D, Torrence Jr.	4908 SAVARESE CIR
Add			TAMPA, FL 33634
X Remove			
3) Change	P	Gary M. Suris	4908 SAVARESE CIR
X Add			TAMPA, FL 33634
Remove			
4) Change	T	Karen R. Suris	4908 SAVARESE CIR
<u>X</u> Add			TAMPA, FL 33634
Remove			
5) Change	S	Karen R. Suris	4908 SAVARESE CIR
X Add			TAMPA, FL 33634
Remove			
6) Change	-		
Add			
Remove			

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
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an amendment provides for an excha rovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

	The date of each amendment(s) adoption:
	Effective date if applicable:
	Effective date if applicable:  (no more than 90 days after amendment file date)
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
t	Adoption of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
	☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approval
	by"  (voting group)
	(voting group)
	☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated
	Signature
	(By a director, president or other officer—if directors or officers have not been
	selected, by an incorporator if in the hands of a receiver, trustee, or other court
	appointed tiduciary by that fiduciary)
	Gary Duris
	(Typed or printed name of person signing)
	President
	(Title of person signing)