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COVER LETTER

· TO:

Tallahassee, FL 32314

TO: Registration : Division of Co				
SUBJECT:	Trend Holdi	nas 110		
30bsect.	Name of Lin	ited Likibility Company		
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	pondence concerning this matter	to the following:		
		Neil Smiley Name of Person		
	Tre		<u>C</u>	
	10343 Er	nerson St.	一一	
	Par	Kland FL 33074 City/State and Zip Code	1100 OF 50	
	N Smiley C	1426@ gmail. Com	fication)	
For further information	concerning this matter, please c	all:		
N	eil Smiley	at (<u>561</u>) <u>239</u> -		
Name	of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for	the following amount:			
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address:	etion	
Registration Division of	Corporations	Registration Se Division of Cor		
P.O. Box 63		The Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compar (A Florida Limited L	oldings LLC ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 34000084346</u> .	were filed on $\frac{2-16-34}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
he new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	-77
	美力 一
Enter new mailing address, if applicable:	Sec p
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:	e e e
	Enter Florida street address
	Florida
	City Zip Code

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	Norine Smiley	4031 E. Walter Way	î v Add
	1	Phoenix, AZ 85050	□ Remove
			□Change
MBR_	Jodi Wolfus	5305 E. Helena Dr.	\overline \lambda \dd
		Scottsdale, AZ 85254	
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nent's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Tiled.	g.) Pursuant to 605.020
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	The 90th day after the
March 7th	
α	
/ // / /	
Signature of a member or authorized representative of a member	
Neil Smiley Typed or printed name of signee	