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Division of Corporations

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: (850) 617-6380

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Account Name : ACCOUNTANT & MANAGEMENT INC

Account Number : I20110000070 Phone : (305)541-3980 Fax Number : (305)541-7033

\*\*Enter the Omail address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN TRAN EMPIRE INC.

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: TRAN EMPIRE INC DOCUMENT NUMBER: P03000034578 The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: MOSES NAE Name of Contact Person **ACCOUNTANT & MANAGEMENT INC** Firm/ Company 1549 NE 123RD ST Address NORTH MIAMI, FL 33161 City/ State and Zip Code INFO@TAXLEAF.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MOSES NAE at 305 541-3980
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52,50 Piling Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Contined Copy (Additional copy is (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

14 NOV 12 Ry 8: 29

Articles of Amendment to Articles of Incorporation of

TRAN EMPIRE INC			
	currently filed with the Flor	ida Dept, of State)	<del></del>
P03000034578			
(Documen	it Number of Corporation (if ki	10Wn)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flo</i>	vrida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new na	une of the corporation:		
			The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "Co	". A professional corporation name	
B. Enter new principal office address. (Principal office address MUST BE A S			<del></del>
C. Enter new malling address it appli (Mailing address MAY BE A POST 6			<u></u>
			_ <del></del>
D. If amounting the projection despect on		- in Florida autou the name of the	<del>,</del>
D. If amending the registered agent an new registered agent and/or the ner		IN MOTOR SHOT DESTRUCTOR	
Name of Naw Registered Access	BACH UNG TRAN	<u> </u>	
	(Florida street	address)	
New Registered Office Address:		, Plorida	<del></del>
	(City)	(Zip Co	de)
New Replatered Agent's Signature, if a I hereby accept the appointment at regist	hanging Boristered Agent: ered agent. I am Japanar with LTI-fit In P	h and accept the obligations of the pos	illon.
<u></u>	angine of New Registered Age	Int. if changing	

Page 1 of 4

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 tisted 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.

<u>X</u> Change	<u>PT</u> Jo	ohn Doc	
X Remove	<u>v</u> <u>M</u>	like Jones	
X Add	<u>sy</u> se	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PD_	TIET, MUOI AI	1750 UNIVERSITY DRIVE #115
Add Remove			CORAL SPRINGS, FL 33071
2) Change	P	TRAN, BACH UNG	1750 UNIVERSITY DRIVE #115
Add			CORAL SPRINGS, FL 33071
Remove 3) Change			
Add			
4) Change			
Add Remove			
5) Change			
Add			
6) Change			
Add Remove			
LLICHIOVE			

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amending or adding additional tracks and additional sheets, if necessar	ry). (Be specific)			
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in amendment provides for an	etchange seclassifi	ication. Ar cancel	herien of issued	eharee.
rovisions for implementing the a	amendment if not c	ontained in the a	mendment itsel	<u>f:</u>
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The date of each amendment() date this document was signed.	a) adoption:		if other than the	
•	·	•	*** ***	
Ellective date Il applicatie:	iffective date <u>if applicable</u> :  (no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)	· · · · · · · · · · · · · · · · · · ·		
	adopted by the shareholders. The number of			
	approved by the shareholders through voting to for each voting group entitled to vote separat			
"The number of votes	cast for the amendment(s) was/were sufficient i	for approval		
by	(voting group)	**		
	(voting group)			
The agrendment(s) was Avera action was not required.	adopted by the based of directors without share	reholder action and shareholder	a.	
The emendment(s) was/were settion was not required.	adopted by the incorporators without abarehol	der action and shareholder		
Dated 11/12	2/14			
Signature		nur The X		
(By sel-	a director, president or other officer — if directed, by an incorporator — if in the hands of a pointed fiduciary by that fiduciary)		_	
	MUOI AI TIET			
	(Typed or printed name	of person signing)	<del></del>	
	PRESIDENT			
	(Title of person	signing)	<del></del>	