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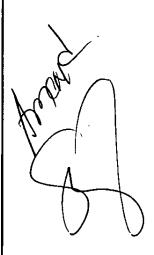
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		THE TRIM GUYS, INC.		
DOCUMENT NU	MBER:	P03000151237		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.		
Please return all co	orrespondence concerning thi	s matter to the following:		
	ALPHONSE R. PASCUAL			
		lame of Contact Person		
		E TRIM GUYS, INC.		
		Firm/ Company		
	13	802 SW 16TH TER		
		Address		
		ORAL, FLORIDA 33991		
	C	ity/ State and Zip Code		
	MQ5 E-mail address: (to be use	73@AOL.COM d for future annual report notification)		
For further inform	ation concerning this matter,	please call:		
	ONSE R. PASCUAL			
Name	e of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a chec	k for the following amount n	nade payable to the Florida Department of State:		
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Articles of Amendment to Articles of Incorporation of

	of		
THE TRI	M GUYS, INC.		
(Name of Corporation as curren		la Dept. of State)	2.
P030	00151237		COIDAN A
(Document Numb	per of Corporation (if kno	own)	19 17 N
ursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	Torida Profit Corporation adopts t	he following An >
. If amending name, enter the new name of	the corporation:		
ame must be distinguishable and contain the bbreviation "Corp.," "Inc.," or Co.," or the came must contain the word "chartered," "profe	designation "Corp," "In	"company," or "incorporated" oc," or "Co". A professional corpo	
Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)		
. If amending the registered agent and/or re new registered agent and/or the new regist		in Florida, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
_	·	, Florida	-
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing the development as registered agence of the appointment as registered agence.		and accept the obligations of the pos	ition.
Sis	gnature of New Registere	ed 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	MICHAEL QUINTERO	1302 SW 16TH TER CAPE CORAL FL 33991	
			
			Add Remove
	ling or adding additional Articles, en iditional sheets, if necessary). (Be sp		
provisio	nendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendment	(s) adoption: 03/13/2010
	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	**
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_03/13	3/2010
Signature	alphase R. Pasuel
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Alphonse R. Pascual
	(Typed or printed name of person signing)
	President
	(Title of person signing)