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06 SEP 28 PM 2:10
--SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 9/29/06
Amend



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2006

MARGIE ROGUE
ROQUE ACCOUNTING SERVICE, INC.
350 SW 56 AVENUE
MIAMI, FL 33134

SUBJECT: TRUST LENDING SERVICES, INC
Ref. Number: P05000081347

We have received your document for TRUST LENDING SERVICES, INC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 106A00054744

RECEIVED
DIVISION OF CORPORATIONS
SEP 11 2006

Articles of Amendment
to
Articles of Incorporation
of

FILED
06 SEP 28 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRUST LENDING SERVICES, INC

(Name of corporation as currently filed with the Florida Dept. of State)

P05000081347

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

REMOVE CHARLES R. GUGLIUZZA FROM REGISTER AGENT POSITION

AND ADD HUMBERTO CAMPORINO AS REGISTER AGENT

2805 SW 129 AVE

Miami, FL 33175

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

SHARES OWNERSHIP: HUMBERTO CAMPORINO 100%

(continued)

The date of each amendment(s) adoption: 08/25/2006

Effective date if applicable: 08/25/2006
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved 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)"

- ☐ 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.

Signature

Humberto Camporino
(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 fiduciary by that fiduciary)

HUMBERTO CAMPORINO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

TRUST LENDING SERVICES, INC.

2. The name and address of the registered agent and office is:


HUMBERTO CAMPORINO
2805 SW 129 AVE.
MIAMI, FL 33175

SIGNATURE: 

TITLE: PRESIDENT

DATE: AUG, 25, 2006

HA VINO BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORA TJON, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND J FURTHER AGREE TO COMPL Y WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND J AM FAMILIAR WITH AND. ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. OR IF THIS DOCUMENT IS BEING FILED MERELY TO REFLECT A CHANGE IN THE ~GISTERED OFFICE ADDRESS, I HEREBY CONFIRM THAT THE CORPORA nON HAS BEEN NOTIFIED IN WRITING OF THIS CHANGE.

SIGNATURE: 

TITLE: PRESIDENT

DATE: AUG 25, 2006