P05000101703

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400061944234

12/07/05--01019--008 **52.58

SECRE JAN CORPORATIONS
01VISION OF CORPORATIONS
05 DEC -7 PH 12: 00

Marchange 12/13/05 De

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Secure	Home Healthcare Inc.
DOCUMENT NUMBER: P05000101	703
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Maria Alejandra Rinco	on
(N	ame of Contact Person)
Secure Home Health	ncare Inc.
	(Firm/ Company)
4648 NW 107 Ave S	uite#2502
	(Address)
Doral, Florida 33178	<u> </u>
(Ci	ity/ State and Zip Code)
For further information concerning this ma	tter, please call:
Maria Alejandra Rincon (Name of Contact Person)	at (305) 409-0916
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
□\$35 Filing Fee	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Secure Home Healthcare Inc.		
(Name of corporation as currently filed with the Florida Dept. of State)	•
P05000101703	, -	=
(Document number of corporation (if known)	***	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Pro</i> adopts the following amendment(s) to its Articles of Incorporation:	ofit Corporation	
NEW CORPORATE NAME (if changing):	-	
Trine Trading Inc.	_	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., (A professional corporation must contain the word "chartered", "professional association," or the		
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	Article Number(s)	
		·
		9
	.:: 05 D	SEC
	ĘĊ	を発
	<u> </u>	TAPE CONTRACTOR
		충수급
		STA
	5	
		ক্ত
	<u>. —</u>	٠
(Attach additional pages if necessary)		~ *.
If an amendment provides for exchange, reclassification, or cancellation of issue for implementing the amendment if not contained in the amendment itself: (if not	d shares, provisions applicable, indicate N/	s 'A)
		s =

(continued)

The date of each amendment(s) adoption: November 25, 2005
Effective date if applicable:
(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 east 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 (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)
Maria Alejandra Rincon
(Typed or printed name of person signing)
President

FILING FEE: \$35

(Title of person signing)