P08000107485

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone) #)
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(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
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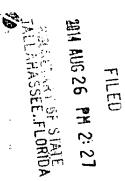
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COVER LETTER

TO: Amendment Section Division of Corporations

ITALIAN TRENE	INC	
P08000107485		dish da v · · · ·
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Myrna Putignano		
ITALIAN TREND INC	Name of Contact Pers	Son
660 Warren Lane	Firm/ Company	
Key Biscayne FL 33149	Address	
	City/ State and Zip Co	ode
myrna@thetrend.biz		
E-mail address: (to be used	for future annual repo	ort notification)
For further information concerning this matter, please of	call:	
Myrna Putignano	786	5347798
Name of Contact Person	Area (Code & Daytime Telephone Number
Enclosed is a check for the following amount made pay	able to the Florida De	partment of State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	□\$43.75 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	Ame Divis Clifts	et Address ndment Section sion of Corporations on Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

FILED

•	to
	Articles of Incorporation
	of
ITALIAN TREND INC	

	01	£ 11-	
TALIAN TREND INC		r State) 214 AUG 26	PM 2: 21
(Name of Corporation as currently filed w	ith the Florida Dept. of	f State) WILL AUG ZO	TATE
P08000107485		72 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SEE, FLORIDA
(Document Number of Corpo	oration (if known)	TALLATINA	
Pursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation:	ites, this <i>Florida Profit</i>	Corporation adopts the	following amendment
. If amending name, enter the new name of the corpora	ation:		
			The new
Corp.," "Inc.," or Co.," or the designation "Corp," "Invord "chartered," "professional association," or the abbre B. Enter new principal office address, if applicable:		sional corporation nan	ne must contain the
Principal office address <u>MUST BE A STREET ADDRESS</u>	<u></u>		
			
			
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
) If	90° 3 3 101 13 -	44h	
 If amending the registered agent and/or registered off new registered agent and/or the new registered office 		enter the name of the	
Name of New Registered Agent			
		 	
	Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip e	Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		the obligations of the n	osition
петену ассерсте арронитет аз гедімегей адет. Тат з	чиниат жин ана ассері	the obligations of the p	osmon.
		<u> </u>	
Signature of New Reg	gistered Agent, if changi	ng	

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 listed 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		Stefano Casini	660 Warren Lane
Add				Key Biscayne
Remove				FL 33149
2) Change	D		Myrna Putignano Casini	660 Warren Lane
Add		_		Key Biscayne
				FL 33149
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
			- 1000	· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
6) Change		_		
Add				
Remove				

	cles, enter change(s) here: (Be specific)
•	(}
- .	
(f an amandmant musides for an auch	
provisions for implementing the emer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
or ovisions for implementing the affect	idment if not contained in the amendment usen.
Lit not anniicable indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

e e 🚣 e e e e	
The date of each amendment(s) adoption:	_, if other than th
Effective date if applicable: (no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted 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.	
August 20th 2014	
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)	_
MYRNA PUTIGNANO	
(Typed or printed name of person signing)	_
DIRECTOR	_
(Title of person signing)	