PD8000107485

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ITALIAN TREND	INC	
DOCUMENT NUM	BER: <u>P0800010</u>	7485	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	MYRNA PUTIGNANO		
	ITALIAN TREND INC	Name of Contact Person	n
	789 CRANDON BLVD APT	Firm/ Company 405	
	KEY BISCAYNE , FL 33149	Address	
		City/ State and Zip Cod	e
myr	na@thetrend.biz		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Myrna PUTIGNAN)	305 at (9511101
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	\$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)
An Div P.C	neiling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

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ITALIAN TREND INC

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

P08000107485

(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:

name must be distinguishable and con	tain the word "cornorati	on." "company." or "ii	The new ncorporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associated assoc	nation "Corp," "Inc," or	"Co". A professional c	
B. Enter new principal office address,	if applicables	789 CRANDON BL	VD APT 405
(Principal office address MUST BE A S		KEY BISCAYNE,	FL 33149
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			VD APT 405
	.=	KEY BISCAYNE, I	FL 33149
			ne name of the
D. <u>If amending the registered agent ar</u> new registered agent and/or the ne			ne name of the
D. If amending the registered agent are new registered agent and/or the new Name of New Registered Agent			ne name of the
new registered agent and/or the ne	w registered office addre	SS:	ne name of the
new registered agent and/or the new Name of New Registered Agent	w registered office addre	treet address)	33149
new registered agent and/or the ne	w registered office addre	treet address)	
new registered agent and/or the new Name of New Registered Agent	w registered office addre	treet address) 05, Key Biscayne	33149 , Florida
new registered agent and/or the new Name of New Registered Agent New Registered Office Address:	w registered office addre	treet address) 05, Key Biscayne (City)	33149 , Florida
new registered agent and/or the new Name of New Registered Agent	w registered office addre	treet address) 05 , Key Biscayne (City)	33149 , Florida(Zip Code)
new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	w registered office addre	treet address) 05 , Key Biscayne (City)	33149 , Florida(Zip Code)
new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	w registered office addre	treet address) 05 , Key Biscayne (City)	33149 , Florida(Zip Code)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
x Change	D	Myrna Putignano	789 Crandon Blvd Apt 405
Add			Key Biscayne, FL 33149
Remove			
x 2) Change	D	Stefano Casini	789 Crandon Blvd Apt 405
Add			Key Biscayne, FL 33149
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	<u> </u>		
Remove			
6) Change			
Add			
Remove			

Sc/A	ts, if necessary). (es, enter change(s) here Be specific)	-		
NIA	,				
19/1			·		
				•	
			<u> </u>		
	vides for an eychan	uge reclassification or	cancellation of issued s	zhares	
If an amendment pro	menting the amend	ment if not contained	in the amendment itself	2	
If an amendment pro provisions for imple					
provisions for imple	, indicate N/A)				
cif not applicable	, indicate N/A)				
cif not applicable	e, indicate N/A)				
cif not applicable	e, indicate N/A)				
provisions for imple	e, indicate N/A)				
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provisions for imple	e, indicate N/A)				
provisions for imple	e, indicate N/A)				

July 10th 2015	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.	ot be listed as the
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)	
(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.	
July 10th 2015	
Dated	
Signature Mey Tel Teller Teller	
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)	-