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SECRETARY OF STATE
TALLAHASSEE, FI ORINA

MAR 04 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Auto and freight document number: P09000888	+ Shipport			
DOCUMENT NUMBER: 0 9 0000 8 \$ 8	22			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Mitchell levin / Name of Contact Person				
Anto and freight Shippers				
4/05 N. 48th Are				
'Address				
Holly Wood Fl 37021 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Jessy Rosew, CAA at (954) Name of Contact Person Area C	ode & Daytime Telephone Number			
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\$35 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment S	t Address			

xecutive Center Circle Tallahassee, FL 32301

me of Contact Person

Area Code & Daytime Telephone Number

Articles of Amendment to

Articles of Incorporation

FILED

(Zip Code)

SECRETARY OF STATE 09 000 0888 7 7 (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: A. If amending name, enter the new name of the corporation: TRADING GROUP PAYTHES, INC The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 4105 N. YSTARE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Hollywood H 33021 C. Enter new mailing address, if applicable: JERRY ROSEN 7880 N. UNIVERSITY AVE STE ZOI (Mailing address MAY BE A POST OFFICE BOX) TAMARAZ FC 33321 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered a

ew registered office address:

Name of New Registered Agent

y)

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.

	, and Sally Smith, SV as an Add.
Example: X Change	PT John Doe
X Remove	<u>V</u> <u>Mike Jones</u>
X Add	SV Sally Smith
Type of Action (Check One)	Title Name Address
1) Change	
Add	1 / / /
Remove	
2) Change	
Add	
Remove	\ , // /
3) Change	
Add	
Remove	· / / /
4) Change	$\mathcal{A}\mathcal{A}\mathcal{A}$
Add	
Remove	
5) Change	
Add	// \
Remove	1112 -
6) Change	
Add	
Remove	
	Page 2 of 4
	MM

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
1
F. If an amendment provides for an 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)
MA

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: 25/2014 (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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.	
Dated 7/25/2014	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands o	
MItchell N. Cevin	_
Mitchell N. Levin President (Title of person signing)	
(Title of person signing)	_

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