P10000004326

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	—
Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	TRIO EAST INC		
DOCUMENT NUMB	ER:	P10000004326		
The enclosed Articles of	of Amendment and fee ar	re submitted for filing.		
Please return all corresp	oondence concerning this	s matter to the following:		
	TIM HOWARD			
		ame of Contact Person		
JAMES AND HARRIS CPAS PA				
	Firm/ Company			
	857 EDGEWOOD AVE S			
	Address			
	JACKSONVILLE FL 32205			
	City/ State and Zip Code			
	TIM@JAME E-mail address: (to be used	SANDHARRIS.COM Tor future annual report notification)		
For further information	concerning this matter, i	please call:		
	HOWARD	at (904) 3 Area Code & Daytime Te	89-2725	
Name of Co	ontact Person	Arca Code & Daytime Te	lephone Number	
Enclosed is a check for	the following amount m	ade payable to the Florida Depar	rtment 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)	
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	le	



April 8, 2010

TIM HOWARD JAMES AND HARRIS CPAS PA 857 EDGEWOOD AVE S JACKSONVILLE, FL 32205

SUBJECT: TRIO EAST, INC Ref. Number: P10000004326

We have received your document for TRIO EAST, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 710A00008633

Tina Roberts Regulatory Specialist II

www.sunbiz.org

Articles of Amendment Articles of Incorporation of

PH 1: 56
OT STATE
EE FLORIDA
adopts the following
The new
orated" or the mal corporation

e of the
22256
32256
of the position.

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)

Title	<u>Name</u>	Address	Type of Action
<u>P</u>	ALAN M KHALED	5882 GREEN POND DR JACKSONVILLE FL 32256	☐ Add
<u>P</u>	ALAA M KHALED	5882 GREEN POND DR JACKSONVILLE FL 32256	_ ☑ Add □ Remove
T/S	MOHAMMAD A KHALED	5882 GREEN POND DR JACKSONVILLE FL 32256	_
E. If amend (attach ad	ding or adding additional Articles, entended ditional sheets, if necessary). (Be spe	er change(s) here:	
provisio	nendment provides for an exchange, rons for implementing the amendment of applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: APRIL 2, 2010
Effective date if applicable:	APRIL 2, 2010 (date of adoption is required)
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_APF	RIL 2, 2010
>	
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	MOHAMMAD A KHALED
	(Typed or printed name of person signing)
	TREASURER SECRETARY
	(Title of person signing)