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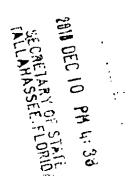
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COVER LETTER

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		<u>COVER LETTER</u>		
TO: Amendment Section Division of Corpo				TALLAHASSEE FLOPIC
NAME OF CORPOR	ATION: TRAUMATRAIN	ING.NET, INC		SEE
DOCUMENT NUMB				OPPLE SE
	of Amendment and fee are st	ibmitted for filing.		 2
Please return all corres	pondence concerning this ma	itter to the following:		
1	DESCILO, TERESA			
-	·	Name of Contact Person	n	
•	TRAUMATRAINING.NET.	INC		
-		Firm/ Company	 -	
	16313 SW 99TH PLACE	, ·		
-		Address		
i	MIAMI, FL 33157			
-		City/ State and Zip Code	e	
dakini	7@bellsouth.net			
	E-mail address: (to be us	sed for future annual report	notification)	_
For further information	concerning this matter, pleas	se call:		
Joshua Colon		at (³⁰⁵	477-9722	
Name o	f Contact Person		de & Daytime Telephone Ni	ımber
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

TRAUMATRAINING.NET, INC.

		77	
(Name of Corporation as current	tly filed with the Florida Dept. of State)	5,7	
P11000004044		100 F	
(Document Number of	of Corporation (if known)	927.	ं
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the follo	owing amendment	(s) to
A. If amending name, enter the new name of the corporation:			
The International Trauma Resolution and Resiliency Center Corp		The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name n	he abbreviation	
B. Enter new principal office address, if applicable:	17510 SW 109 Av		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33157		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres			
			
Name of New Registered Agent			
(Florida st	treet address)		
New Registered Office Address:	. Florida		
wew Regissered Office Address.		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the positi	ion.	
Signature of New .	Registered Agent, if changing		

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	
<u>X</u> Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			_ · · ·

f 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)	Attach additional sheets, if necessary).	(Be specific)			
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provisions for implementing the amendment if not contained in the amendment itself:					
provisions for implementing the amendment if not contained in the amendment itself:	f an amendment provides for an exch	ange, reclassification	on, or cancellation	of issued shares.	
(if not applicable, indicate N/A)	provisions for implementing the amer	ndment if not conta	ined in the amend	lment itself:	
	(if not applicable, indicate N/A)				
					•
	· · · · · · · · · · · · · · · · · · ·				
	<u> </u>			<u> </u>	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(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 we document's effective date on the Department of State's records.	vill not be listed as the
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 Board of Directors	
(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)	
Teresc Descile (Typed or printed name of person signing)	
President. (Title of person signing)	
(Title of person signing)	