P11000011032

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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SEGRETARY OF STATE

FEB 1 5 2016.
T. LEMIEUX

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NUTREND REAL	TY, INC		
DOCUMENT NUMI	BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Lars Kier			
		Name of Contact Person	1	
	NuTrend, Inc.			
		Firm/ Company		
	19913 Tamiami Ave.	- 1. 7		
		Address		
	Tampa, FL 33647			
	•	City/ State and Zip Cod	<u> </u>	
		,		
Lars	®KierHomes.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Lars Kier		at (<u>813</u>		
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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 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

NUTREND REALTY, INC (Name of Corporation as currently filed with the Florida Dept. of State) P11000071032 (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: NuTrend, Inc. 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." 19913 Tamiami Ave. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Tampa, FL 33647 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

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

Attach <i>addit</i>	or adding additional Ar ional sheets, if necessary)	. (Be specific)			
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	, <u>, , , , , , , , , , , , , , , , , , </u>				
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<u>provisions</u>	ment provides for an exc for implementing the am	change, reclassifi tendment if not c	cation, or cancella ontained in the an	ition of issued sha nendment itself:	res,
(if not a	applicable, indicate N/A)				

, if other than the
Il not be listed as the

(Title of person signing)