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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section
Division of Corporations

| Division of Corporations | | | | | |
|---|--|--|--|--|--|
| NAME OF CORPORATION: MIRAI PI | | DE CORP | | | |
| DOCUMENT NUMBER: P12000093 | 622 | | | | |
| The enclosed Articles of Amendment and fee are s | submitted for filing. | | | | |
| Please return all correspondence concerning this m | atter to the following: | | | | |
| CAROLINA Q | UINTERO AR | AUJO | | | |
| | Name of Contact Perso | n | | | |
| TAXES & ACC | | DLUTIONS | | | |
| 0040 NNA/ 007 | Firm/ Company | | | | |
| 8249 NVV 361 | 8249 NW 36TH SUITE 120-A | | | | |
| DORAL,FL 33 | Address | | | | |
| | City/ State and Zip Cod | e | | | |
| accounting@tasmiami.com | | | | | |
| | used for future annual report | notification) | | | |
| Encluded Consideration of the constant | 11 | | | | |
| For further information concerning this matter, plea | ase call: | | | | |
| CAROLINA QUINTERO | _{at (} 305 | , 4181585 | | | |
| Name of Contact Person | | de & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | |
| □ \$35 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 Street Address | | | | | |
| Amendment Section Amendment Section Division of Corporations Division of Corporations | | | | | |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

MIRAI PREMIUM TRADE CORP

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

| P 1 | 20 | O O | nar | 3622 |
|------------|----|------------|------|------|
| | | | U.T. | 3U// |

(Document Number of Corporation (if known)

| Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation: | orida Statutes, this Fl | orida Profit Corporation a | dopts the following | amendment(|
|--|-------------------------|-----------------------------|---|--------------------------|
| A. If amending name, enter the new name of the ANNED GROUP CORP | e corporation: | | | The new |
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or | Corp," "Inc," or "Co | o". A professional corpor | orated" or the abl cation name must co | previation ontain the |
| B. Enter new principal office address, if applic (Principal office address MUST BE A STREET) | | | | |
| | | | 7 SE | <u>ਜ</u> |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | BOX) | | | |
| | | | | 章 (5) |
| D. If amending the registered agent and/or reg new registered agent and/or the new registe | | s in Florida, enter the na | me of the | Ġ |
| Name of New Registered Agent | | | _ | |
| | (Florida stree | t address) | - | |
| New Registered Office Address: | (City) | , Florida | (Zip Code) | |
| New Registered Agent's Signature, if changing | Registered Agent: | | | |
| I hereby accept the appointment as registered age | | h and accept the obligation | ns of the position. | |
| Signature o | of New Registered Ag | ent, if changing | - | |

| address of each Officer (Attach additional sheets, Please note the officer/di. P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted | and/or D if necess rector titl President = Chief I r, Directo in the foi | irector be ary) e by the fi ; T= Trea financial for would b flowing me proporation | eing added: rst letter of the office tsurer; S= Secretary; Officer. If an officer te PTD. anner. Currently Joh 1, Sally Smith is name | title: D= Director; TR= Track/director holds more the | irector being removed and title, name, and ustee; C = Chairman or Clerk; CEO = Chican one title, list the first letter of each offices of and Mike Jones is listed as the V. There would be noted as John Doe, PT as a Change | of ce is |
|---|--|--|---|---|---|----------------|
| X Change | <u>PT</u> | John Do | <u>e</u> | | | |
| X Remove | <u>v</u> | Mike Joi | nes | | | |
| X Add | <u>sv</u> ` | Sally Sm | nith . | | | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | | <u>Addres</u> s | ٠ |
| 1) Change | | _ | | | | |
| Add | | | | | | |
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| 4) Change | | _ | | · · · · · · · · · · · · · · · · · · · | | |
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| 5) Change | | | | | | |
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Change

Add

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| ttach additional sheets, if necessary). | cles, enter change(s) here: (Be specific) |
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| an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
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| orovisions for implementing the amer (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
| orovisions for implementing the amer (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
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| orovisions for implementing the amer (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: 12/18/2014 | , if other than the |
|--|-------------------------|
| date this document was signed. | , 0 11.02 11.102 11.102 |
| Effective date if applicable: 12/18/2014 | |
| (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 amendaby the shareholders was/were sufficient for approval. | ment(s) |
| The amendment(s) was/were approved by the shareholders through voting groups. The following so 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) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required. | eholder |
| The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required. | ler |
| Dated 12/18/2014 | |
| Signature | |
| (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary) | |
| EDERALDO MAFRIN | |
| (Typed or printed name of person signing) | |
| OFFICER | |
| (Title of person signing) | · · |