D/300000128

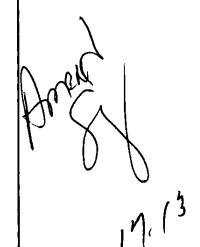
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · ·
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

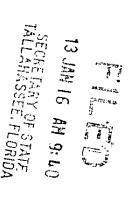
· Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SYTRAEN	SERVICES INC	,
DOCUMENT NUME	BER: P1300000012	8	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	Elena Pacheco-V	illalta	
		Name of Contact Persor	1
	Villalta & Associa	tes Accounting (Group
		Firm/ Company	
	5454 NW 59th. P	lace	
		Address	
	Tamarac, FL.333	19	
		City/ State and Zip Code	
olo	novillalta@comoo	et not	
ele	navillalta@comca	ed for future annual report	notification)
	L-man address. (to be as	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call·	
Tot fatalor miorination	n concerning this matter, pieus	c cum.	
Elena Pache	co-Villalta	_{at (} 954	724-8670
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	urtment 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)
<u>Mai</u>	ling Address	Street	<u>Address</u>
	endment Section		lment Section
	sion of Corporations		on of Corporations
	. Box 6327 ahassee, FL 32314		Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SYTRAEM SERVICES INC

	ntly filed with the Florida Dept. of State)	CEE, FLORIDA
P100000128		
(Document Numl	ber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation add	opts the following amendment(s) t
A. If amending name, enter the new name of	the corporation:	
	e word "corporation," "company," or "incorpor "Corp," "Inc," or "Co". A professional corporate or the abbreviation "P.A."	
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX	
D. If amending the registered agent and/or re new registered agent and/or the new regis	gistered office address in Florida, enter the name	e of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Efren Munoz-Prito	1100 NW 87th Ave
Add			Apt 502
X Remove			Coral Springs FI 33071
2) Change	Р	Efren Munoz P	1100 NW 87th Ave
X Add	_		Apt 502
Remove			Coral Springs FI.33071
3) Change			
Add			
Remove			
4) Change		-	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change			
Add			
Remove			

Attach additi	or adding additional Artional sheets, if necessary).	(Be specific)	_	
<u></u>				
			 	
				
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		• • • • • • • • • • • • • • • • • • • •		
				•
				
		<u> </u>		
lf an amendi	<u>ient provides for an exch</u>	ange, reclassification, or	cancellation of issued sha	res,
provisions f	or implementing the amer oplicable, indicate N/A)	adment if not contained	in the amendment itself:	
(ij noi u	pricable, malcule WA)			
		·		
	-			

The date of each amendment(s) adoption: 01/10/2013		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
Dated	01/11/13 Plus 10	
(By a d	irector president or other officer—if directors or officers have not been d, by an incorporator—if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	