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NOV 10 2014

R. WHITE

COVER LETTER

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **■**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

FILED 14 OCT 30 PM 2: 08

Articles of Amendment to Articles of Incorporation

ANCHE LANY OF STATES

Articles of incorporation
Trender Mysetmonts inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P130000 19599
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) tits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
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."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) STILL D THOUGH D. TO THE TOTAL PRINCIPAL PRINCIP
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Site D Olando, FL 3285 Olando, FL 3285
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 Jeremy Israel Gomlz 7485 Corney Whole Med, Rd, WiteD (Florida street address)
New Registered Office Address: Olando , Florida 3235 (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:	,	y onun, or us un nuu.					
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>	Address				
1) Change	P	Marcela Gomez	5207 komquat loop				
Add			Undermore, FC				
2) Change	P	Jenemy I Gomez	2485 Conny Windernere ld svite D				
Remove 3) Change	<u>\</u>	Geannys Gromez	Orlando, Pl 32835 7485 Connay Windermere Rd Svite D				
Remove			Orlando, Fl 32835				
4) Change							
Add Remove							
5) Change							
Add Remove							
6) Change							
Add							
Remove			 _				

Attach additio	r adding additiona nal sheets, if necess	ary). (Be specif	ic)		
		· · · · · · · · · · · · · · · · · · ·			
			<u> </u>		
				 	
f an amendr	ient provides for a	n exchange, recla	ssification, or ca	ncellation of issu	ed shares.
provisions fo	or implementing th	e amendment if n	ot contained in t	he amendment i	tself:
	oplicable, indicate N	I/A)			
NA					
7					· · · · · · · · · · · · · · · · · · ·
_ 					
					

The date of each amendment(s) adoption: 1028/14	, if other than the
date this document was signed.	
Effective date if applicable: (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 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"	
by" (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.	
Dated 10/28/14	
Signature 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)	
MArcia Gomez	
(Typed or printed name of person signing)	
<u>the sident</u>	
(Title of person signing)	