P13000030188

| (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: | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



600267249676

12/12/14--01009--002 **35.00

TA DEC 12 KM St. 33

Andrad 12/16/14

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Trading & E | Brokers Limited, | Inc | | | | |
|---|---|--|--|--|--|--|--|
| DOCUMENT NUMBER: P13000030188 | | | | | | | |
| The enclosed Articles | The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | |
| Please return all corre | Please return all correspondence concerning this matter to the following: | | | | | | |
| | Erika N Rivero | | | | | | |
| | | Name of Contact Persor |) | | | | |
| | Trading & Broker | s Limited, Inc | | | | | |
| | | Firm/ Company | | | | | |
| | 419 West 49 St # | 219-112 | | | | | |
| | | Address | | | | | |
| | Hialeah Florida 3 | 3012 | | | | | |
| | | City/ State and Zip Cod | e | | | | |
| eril | kaifm@hotmail.co | m | | | | | |
| ·s. ···· | | sed for future annual report | notification) | | | | |
| | | | | | | | |
| For further information | on concerning this matter, pleas | se call: | | | | | |
| Erika N Rive | ro | at (305 | , 7225138 | | | | |
| 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 | ☐\$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 | | Street Address | | | | | |
| Amendment Section | | Amendment Section | | | | | |
| Division of Corporations | | Division of Corporations | | | | | |
| P.O. Box 6327 | | Clifton Building | | | | | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circle Tallahassee, FL 32301 | | | | | |

Articles of Amendment to Articles of Incorporation of



to

Trading & Brokers Limited; Inc.

| (Name of Corporation as | currently filed with the Flor | ida Dept. of State) |
|---|---|---|
| P 13000030188 | | |
| (Documen | t Number of Corporation (if k | iown) |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this <i>Fla</i> | orida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new na N/A | me of the corporation: | The new |
| name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered" "professional associat | ation "Corp." "Inc." or "Co | company," or "incorporated" or the abbreviation A professional corporation name must contain the |
| B. Enter new principal office address, if applicable: | | 419 West 49 St # 219-112 |
| (Principal office address MUST BE A S) | | Hialeah. Florida. 33012 |
| • | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 19214 Nw 48 Ave |
| | | Miami Gardens Florida 33055 |
| | | |
| D. If amending the registered agent an new registered agent and/or the new | | s in Florida, enter the name of the |
| Name of New Registered Agent | Erika N Rivero | |
| | 419 West 49 St # | 219-112 |
| | (Florida street | |
| <u> New Registered Office Address:</u> | Hialeah | . Florida 33012 (Zip Code) |
| | (City) | (Zip Code) |
| | | |
| New Registered Agent's Signature, if c | | h and accept the obligations of the position. |
| Therety decept the appearance as region | Erina Nivero | The decelor me of a game of the positions |
| | gnature of New Registered Ag | em, 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: \hat{T} * Treasurer, S * Secretary, D * Director: TR * Trustee: C * Chairman or Clerk, CEO * Chief Executive Officer, CEO * 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> 79</u> | John Dog | |
|----------------------------|------------|-------------------|---|
| \underline{X} Remove | 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 | P | Erika N Rivero | 419 West 49 St #219-112 |
| Add | | | Hialeah Fl 33012 |
| Remove | | | |
| 2) Change | VP | Erika I Fernandez | 419 West 49 St #219-112 |
| Add | | | Hialeah Fl 33012 |
| Remove | | | |
| 3) Change | VP | Juan Molina | 419 West 49 St #219-112 |
| Add | | | Hialeah Fl 33012 |
| Remove | | | |
| 4) Change | VP | Casiano Ramirez | 419 West 49 St #219-112 |
| Add | | | Hialeah Fl 33012 |
| Remove | | | |
| 5) Change | | | |
| Add | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | |
|--|-------------|
| N/A | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| F. If 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) | |
| N/A | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| The date of each amendment(s) adoption: 12/09/2014 | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date if applicable: 12/09/2014 | |
| (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 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 east 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 shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated_12/09/2014 | |
| Signature Egiko Ni veno | _ |
| (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) | |
| Erika N Rivero | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | _ |