P150000004995

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	1
Certified Copies	_ Certificate:	s of Status
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SECRETARY OF SAME SINGER

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COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: TMS' Trade ±00. DOCUMENT NUMBER: P1500000 4995				
DOCUMENT NUMBER: Y150000 4995				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
All cia C. Segovia Name of Contact Person				
THS Trade toc.				
8186 Mizner La Address				
Baca Raton, FL 33433 City/ State and Zip Code				
Sydches & hot mail, com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Alicia d. Segovia at (561) 674-3200 Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & 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 Certificate of Status Certified Copy (Additional copy is enclosed) 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

	ila Dana aggana)	
	ida Dept, of State)	
Number of Corporation (if known	wn)	
atutes, this <i>Florida Profit Corpo</i>	pration adopts the following amendm	ent(s
pration:	The The	DIVISION.
	l corporation name must contain th	e 🏋
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<u> </u>		
office address in Florida, enter	the second of the	
<u>ce address:</u>	the name of the	
··· · · · · · · · · · · · · · · · · ·		
(Florida street address)		
	Florida	
(City)	(Zip Code)	
ered Agent:		
n familiar with and accept the o	bligations of the position.	
	Number of Corporation (if known atutes, this Florida Profit Corporation: corporation:	Number of Corporation (if known) atutes, this Florida Profit Corporation adopts the following amendmentation: The Tree corporation, "company," or "incorporated" or the abbreviation (Inc," or "Co". A professional corporation name must contain the reviation "P.A." SSS) office address in Florida, enter the name of the ce address: (Florida street address) , Florida (City) (Zip Code)

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 <math>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>	Name		<u>Addres</u> s
1) Change		Christia	n R. Haidana	2 8186 Hizner Ln
_X_Add				Boca Raton, FL
Remove	:			33433
2) Change				
Add				
Remove				
3) Change	-			••••
Add				
Remove				
4) Change	·			***************************************
Add				
Remove				
5) Change			#1016-1	
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
A CONTRACTOR AND A CONT	······································
	
<u> </u>	
f an amendment proyides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:

•	The date of each amendment(s) adoption: $5/26/2015$, if other than the date this document was signed.
	Effective date if applicable:
	(no more than 90 days after amendment file date)
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
	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" (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 5 26 2015
	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)
	Alicia C. Segovia (Typed or printed name of person signing)
	Plesident (Title of person signing)
	(Title of person signing)