## P15000013075

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ISA TRADIN	G AND REPRESENTATION SERVICES CORP				
DOCUMENT NUMBER: P15000013075					
The enclosed Articles of Amendment and fee a	re submitted for filing.				
Please return all correspondence concerning thi	s matter to the following:				
ROGERS FRECCIA					
	Name of Contact Person				
ISA TRADING AND R	ISA TRADING AND REPRESENTATION SERVICES CORP				
	Firm/ Company				
5300 W Hillsboro Blvd	Suite 214				
	Address				
Coconut Creek FL 3307	3				
	City/ State and Zip Code				
rogeralumasausa@gmail.com					
E-mail address: (to	be used for future annual report notification)				
For further information concerning this matter,	•				
ROGERS FRECCIA	at (786 ) 516-1120				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:				
\$35 Filing Fee					
Mailing Address 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				

## Articles of Amendment to Articles of Incorporation of

## ISA TRADING AND REPRESENTATION SERVICES CORP

(Name of Corneration as current	tly filed with the Florida Dept. of State)
P15000013075	try med with the Fronting peps of state)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	The men
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5300 W Hillsboro Blvd Suite 214
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Coconut Creek FL 33073
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5300 W Hillsboro Blvd Suite 214
	Coconut Creek FL 33073
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent  ROGERS FRECCIA	
(Florida st	treet address)
New Registered Office Address: 5300 W Hillsboro Blvd S	duite 214, Coconut Creek  (City), Florida  (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. Lam familiar  Signature of New 1	with and accept the obligations of the position.  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.

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	VP	Robert Anthony De La Riva	5300 W Hillsboro Blvd Suite 214
X Add			Coconut Creek FL 33073
Remove			
2) Change			
Add			<u> </u>
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamova			

Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)			
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f an amendment provides for an exch	ange, reclassificatio	n, or cancellation	of issued share	<u>s.</u>
provisions for implementing the amer	<u>ndment if not contai</u>	ned in the amendi	nent itself:	
(if not applicable, indicate N/A)				
				···
				<u> </u>
				<u> </u>

	09/30/2015	
The date of each amendment(s) a date this document was signed.	idoption:	, if other than the
09/	30/2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date wisepartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
action was not required.	opted by the incorporators without shareholder action and shareholder	
09/30/201 Dated/	5//	
Signature (Plan)	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	
	ROGERS FRECCIA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	<del></del>