P15000001801

(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(City	//State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(But	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
	,			

Office Use Only



100275485351

08/04/15--01007--009 **35.00



Mund

AUG 6 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TRUYTS ENTER	RPRISES INC					
DOCUMENT NUMBER: P15000041801						
The enclosed Articles of Amendment and fee are s	submitted for filing.					
Please return all correspondence concerning this m	atter to the following:					
	FABIO TRUYTS FERNANDES					
	Name of Contact Person					
	TRUYTS ENTERPRISES INC					
<u></u>	Firm/ Company					
	3110 S MIAMI AVE					
	Address					
	MIAMI, FL 33129					
.	City/ State and Zip Code					
CONTATO	FABIOFERNANDES@HOTMAIL.COM					
E-mail address: (to be	used for future annual report notification)					
For further information concerning this matter, plea	ase call:					
FABIO TRUYTS FERNANDES	at (786 731-5018					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made	e payable to the Florida Department of State:					
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
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

TRUYTS ENTERPRISES INC

(<u>Ivaine or</u>	P15000041	tly filed with the Florida Dept. of State)
		of Corporation (if known)
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new nam	ne of the corporation:	
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if	annlicable:	3110 S MIAMI AVE
(Principal office address MUST BE A STR		MIAMI, FL 33129
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3110 S MIAMI AVE
		MIAMI, FL 33129
D. If amending the registered agent and/ new registered agent and/or the new 1		
		YTS FERNANDES
Name of New Registered Agent _	3110 S MIAM	IAVE
-		treet address)
Now Projectored Office Address	MIAMI	. Florida 33129
New Registered Office Address: _		(City) (Zip Code)
New Registered Agent's Signature, if cha	maina Registered Ager	nt:
I hereby accept the appointment as register	ed agent. I am familia	with and accept the obligations of the position.
	人	Tabio Truits Ferunades
	Signature of New	

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	PT	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
I) X Change	PD		FABIO TRUYTS FERNANDES	3110 S MIAMI AVE
Add				MIAMI, FL 33129
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	or adding additional Artional Sheets, if necessary).	(Be specific)			
<u> </u>					
,					****
					
					
				····	
			··		
	nent provides for an exchor implementing the ame	nange, reclassificati indment if not cont	on, or cancellation ained in the amend	of issued shares, nent itself:	
provisions fo	•				
provisions fo					
provisions fo					
provisions fo					
provisions fo					
provisions fo					

·	JULY 29, 2015	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	JULY 29, 2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ledocument's effective date on the De	block does not meet the applicable statutory filing requirements, this dat epartment of State's records.	e will not be listed as the
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) of the approval.)
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	nt
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required. □ The amendment(s) was/were add	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	r
action was not required.		
JUI. Dated	Y 29, 2015	
Signature(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)	des
	FABIO TRUYTS FERNANDES	
	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR	
	(Title of person signing)	