P17000039799

| (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



500302711215

08/21/17--01027--014 **35.00

ONT AUG 21 AM 9: 2

AUG 25 2017 3 INCX/AIR

COVERLETTER

2011 NIC 21 KM 9: 23 Division of Corporations NAME OF CORPORATION: TOUMP EXPLOSS COLD. DOCUMENT NUMBER: P17000397901 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: -Anci Maria Almoia.

Name of Contact Person Trump Express Curp.

Firm/Company 4508 Garago NE City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

And Mil Cl. Almoro at 501 704 1801

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:

TO: Amendment Section

S35 Filing Fee S43.75 Filing Fee & Certificate of Status

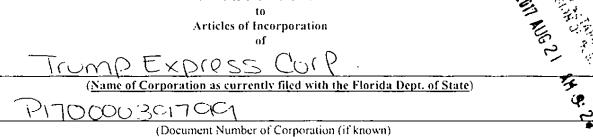
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address 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



Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

| 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) |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) |
| 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 AND NACICA AND CO |
| 4508 BUICIEN FUE (Florida street address) |
| New Registered Office Address: WESTRAM BECK Florida 33405 (City) Florida (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: Thereby 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: 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 | 4 | Aristrida Gonza | 1 <u>ez Aristricki Genzeura</u> |
| Add Remove | | | 4508 Garden NE WS-1 Palm Breach Flzeros |
| 2) Change | P | Ana Maria Almura | Ana Maria Almora |
| _X_ Add | | | 4508 Arindon AVE |
| Remove | | | West Palm Back FL 334105 |
| 3) Change | - | | |
| Add | | | |
| Remove | | er en | |
| 4) Change | | | |
| Add | | | |
| 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) | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| , 1/1/1, | - |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| . 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) | |
| | |
| | |
| | |
| | |
| | |
| | • |
| | |
| | . |
| | |
| | |
| | |
| | |
| | |
| •• | |

| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|--|--------------------------------|
| 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 document's effective date on the Department of State's records. | date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval. | 1(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s): | nent |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by | |
| | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required. | der |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 08 18 17 | |
| 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 conappointed fiduciary by that fiduciary) | n urt |
| (Typed or printed name of person signing) | |
| (Typed or printed name of person signing) | |
| (Title of person signing) | |