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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 540	ictly Trendy Inc.				
DOCUMENT NUMBER: P 1900	00 44771				
The enclosed Articles of Amendment and fee a	are submitted for filing.				
Please return all correspondence concerning th	is matter to the following:				
	Alyssa Martin Name of Contact Person				
	Strictly Trendy Firm/Company				
_ 2180 SL	J 15Znd PL Address				
Mic	City/ State and Zip Code				
E-mail address: (to	trictlytrendy a gmail.com be used for future annual report notification)				
For further information concerning this matter,	please call:				
Alys sa Martin Name of Contact Person	at (786) 223 - 2316  Area Code & 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 State					
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

Strictly Trend (Name of Corporation as currently)	ly Inc.
	ned with the Fiorida Dept. of State)
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	_// <del>/</del> /
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	$\mathcal{N}/A$
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent /	
(Florida street New Registered Office Address:	address) . Florida
· · · · · · · · · · · · · · · · · · ·	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.  istered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Che Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	те, ана за	ny Smin, S) as an Ada.	
X Change	<u>PT</u>	John Doe	
$\underline{X}$ Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Alyssa Martin	2180 SW 152nd PL Miami, FL
Remove			33185
2) Change	<del></del>		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add Remove			
6) Change Add	<del></del>		
Remove			

L. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary).—(Be specific)
(Attach duditional sheets, if necessary). The specific)
$\mathcal{N} / \mathcal{T}$
· · · · · · · · · · · · · · · · · · ·
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)
$\mathcal{N}/\mathcal{A}$
•

The date of each amendment(s) ad	option:	, if other tha
date this document was signed.	1/1	
Effective date if applicable:	<i>N / #</i>	
	(no more than 90 days after amendment f	ile date)
<b>Note:</b> If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requestrement of State's records.	pirements, this date will not be listed
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were sul	oted by the shareholders. The number of votes cast for ficient for approval.	the amendment(s)
• •	roved by the shareholders through voting groups. The peach voting group entitled to vote separately on the am	•
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	$\mathcal{N}\mathcal{M}$ .	
<u> </u>	(voting group)	
action was not required.	oted by the board of directors without shareholder action	
The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action an	d shareholder
Dated_OG	97/19 	
Signature		
(By a di	rector, president or other officer - if directors or officer	
	, by an incorporator – if in the hands of a receiver, trused fiduciary by that fiduciary)	tee, or other court
арропц	Λ 1 i 1	
_	Alyssa Martin	
	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	·

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