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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN TRADYST, INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Articles of Amendment to Articles of Incorporation

	Arucies of In-	•			
TRADYST, INC	of				
(Name	of Corporation as current	y filed with the Florida Dept. of St			
P20000037181	- Control and Carl City	r med with the Florida Dept. of St.	ate)		
	(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 60 its Articles of Incorporation:			e followir	ig amend	dment(s) to
A. If amending name, enter the new I	name of the corporation				
N/A	e say to population.				
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association,		ompany," or "incorporated" or the a professional corporation name m	bbreviatio ist contai	_The in "Corp in the w	
B. Enter new principal office address, if applicable:		8060 SW 159 PLACE			
(Principal office address MUST BE A.S.	STREET ADDRESS)	MIAMI FL 33193			_
					_
C Enter- W					_
C. Enter new mailing address, if app (Mailing address MAY BE A POST	<u>licable:</u> <i>OFFICE BOX</i>)		(C)	20	
			:	<u> </u>	
				- 8	_ : 1
			· · · · · · · · · · · · · · · · · · ·		- ·
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office addre	ess in Florida, enter the name of th	<u> </u>	PH	
	JAIME GARCIA		, - ,	12.	
Name of New Registered Agent			- []	9	
	8060 SW 159 PLACE				
	(Florida stre	et address)			
New Registered Office Address:		City) , Florida			_
	ľ	<i>y</i> /	(Zip C	ode)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist Check if applicable	ered agent. I am familiar wi	th and accept the obligations of the p	osition.		
☐ The amendment(s) is/are being filed p	ursuant to s. 607.6120 (11) (e), F.S.			

PAGE 03/05

(Altach additional sheet. Please note the officer/d P = President; V= Vice Executive Officer; CFO President, Treasurer, Di Changes should be note.	s, if neces lirector ti, Presider = Chief F rector wo d in the fo aves the o	stary) tle by the first letter of the office title: tl; T= Treasurer; S= Secretary; D= L inancial Officer. If an officer/director buld be PTD. ollowing manner. Currently John Doe corporation, Sally Smith is named the	of each officer/director being removed and title, name, and Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief holds more than one title, list the first letter of each office held. is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change,	
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	P	JAIME GONZALEZ	3928 ESTEI'ONA	
Add			DORAL FL 33178	
X Remove				
2) Change	<u>P</u>	JAIME GARCIA	8060 SW 159 PLACE	
XAdd			MIAMI FL 33193	

1) Change	P	JAIME GONZALEZ	3928 ESTEI'ONA
Add			DORAL FL 33178
X Remove			
2) Change	P	JAIME GARCIA	8060 SW 159 PLACE
X Add			MIAMI FL 33193
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

12/04/2020 16:20 3052201440	LAZARUS CORPORATE	PAGE 05/05
The date of each amendment(s) adoption: date this document was signed.	3/202	, if other than th
Effective date if applicable:		
	no more than 90 days after amendment file date)	
		date will not be listed as the
Adontin - e .	CK ONE)	
The amendment(s) was/were adopted by the inc action was not required.	orporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	reholders. The number of votes cast for the amendmentoval.	nt(s)
The amendment(s) was/were approved by the sh must be separately provided for each voting gro	areholders through voting groups. The following state oup entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendm	ent(s) was/were sufficient for approval	
by(voting	,,	
(voting	group)	
appointed fiduciary by	••	n urt
JAIME GARCI	A	

(Typed or printed name of person signing)

(Title of person signific

PRESIDENT