## P21000060379

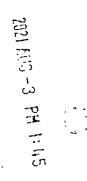
| (Requestor's Name)                      |
|---|
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: TRE MUSIC. INC.   |
|--|
| DOCUMENT NUMBER: <u>P21000060379</u>   |
| The enclosed Articles of Amendment and fee are submitted for filling.  |
| Please return all correspondence concerning this matter to the following:  |
| Raw Heynandez Boove  Name of Contact Person  Tre Hosic  Firm/ Company  |
| 12691 Sw 191 ST Address  |
| City/ State and Zip Code  rauhe condex 463 Q Jahoo com  E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Name of Contact Person at (305), 922-8463  Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount made 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |

## Articles of Amendment to Articles of Incorporation of

| Tre Wasic Try   |                     |
|---|---------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State)  |                     |
| P210000 (00379  |                     |
| (Document Number of Corporation (if known)  |                     |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folits Articles of Incorporation:   | lowing amendment(s) |
| 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 abbre<br>"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must c<br>"chartered," "professional association," or the abbreviation "P.A." | eviation "Corp.,"   |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)   | <del></del>         |
| Trincipal Office address <u>MOST BE A STREET ADDRESS</u> )  |                     |
|   |                     |
|   |                     |
| 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  |                     |
|   |                     |
| (Florida street address)  |                     |
| New Registered Office Address:  |                     |
| New Registered Office Address:, Florida, Florida  | (Zip Code)          |
|   |                     |
|   |                     |
| New Registered Agent's Signature, if changing Registered Agent:<br>I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the posi   | ·•4                 |
| neren, uccept the approximent as registered agent. I am jamitar with and accept the onligations of the post.  | uon.                |
|   | _                   |
|   | 202                 |
| Signature of New Registered Agent, if changing  | 5031 V.C.2          |
| Check if applicable   | ್                   |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.  | ယ်                  |
|   |                     |

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)

Example:

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.

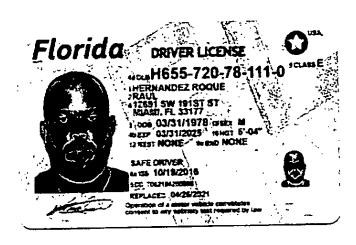
Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, 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) <b>X</b> Change         | P            | Raul Hernandez | 12691 SW 1915T  |
| Add                        |              | U              | miami Fl 33177  |
| Remove                     |              |                |                 |
| 2) Change                  |              |                |                 |
| Add                        |              |                |                 |
| Remove 3 ) Change          |              |                |                 |
| Add                        |              |                |                 |
| Remove                     |              |                |                 |
| 4) Change                  |              |                |                 |
| Add                        |              |                |                 |
| Remove                     |              |                | <del></del>     |
| 5) Change                  |              | <u> </u>       |                 |
| Add                        |              |                |                 |
| Remove                     |              |                |                 |
| 6) Change                  |              |                |                 |
| Add                        |              |                |                 |
| Remove                     |              |                |                 |

| If amending or adding additional Arti<br>(Attach additional sheets, if necessary).                               | (Be specific)   |
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| If an amendment provides for an exch<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| Adding Caterin   | a Services.   |
|  | 0   |
| <del></del>  |   |
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| The date of each amendment(s) adoption: 7 - 09 - 2021 date this document was signed.   | , if other than the       |
|--|---------------------------|
| Effective date if applicable: 7 - 09 · 202   |                           |
| (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 date of document's effective date on the Department of State's records.    | will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                           |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.  | and shareholder           |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.                           |                           |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement  |                           |
| must be separately provided for each voting group entitled to vote separately on the amendment(s):  "The number of votes cast for the amendment(s) was were sufficient for approval. |                           |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  | 2                         |
|  | 202i                      |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by"   | 2021 AU                   |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | 2021 AUG -                |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by"   | 2021 AUG -3               |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | ů                         |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | ů                         |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | ů                         |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  |                           |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | ů                         |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | ů                         |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  | ů                         |



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