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(Address)	
(Address)	•
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	, ;
Certified Copies Certificates of Statu	s.
Special Instructions to Filing Officer:	·

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SECRETARY OF STATE
FALLAHASSEE FIRE

Why In

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION:	AU TILE + MAR	bee TRADING. INC
DOCUMENT NU	MBER: P 9 8 00	000 111 61	
The enclosed Artic	eles of Amendment and fee ar	e submitted for filing.	
Please return all co	prespondence concerning this	matter to the following:	
	FABIO	Mion-Bet	
		Rirm/ Company	
	156	21 SW 457 Address	TRR
*		Address	,
-		7 1 Pm FC 3.	3181
		TO TUTUTE annual report notification)	
	ation concerning this matter, j		
Fabi	U MION-Bet	at (30) 225-	1571
Name	of Contact Person	Area Code & Daytime Tel	cphone Number
Enclosed is a chec	k for the following amount m	ade payable to the Florida Depar	tment of State:
535 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A		Street Address	
Amendmer	it Section	Amendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661-Executive Center Circle
Tallahassee, FL 32301

ROM :ACCOUNTING OFFICE	FAX NO. :3054481648	Jul. 17 2009 11	1:01AM P2
•	Articles of Amendme to Articles of Incorporati of	PSC .	3年上年
I faciaUT	THE + MARKE	TRAding INC	2 2 0
(Name of Corporation as c	currently filed with the Flori	da Dept. of State	
	80000 11161		ALL SO
(Document	Number of Corporation (if kn	own)	T
Pursuant to the provisions of section 607 amendment(s) to its Articles of Incorporation		Florida Profit Corporation adopts	the following
A. Hamending name, enter the new name	ne of the corporation:		
	NIA	T	he new
name must he distinguishable and contabbreviation "Corp.," "Inc.," or Co.," of name must contain the word "chartered," B. Enter new principal office address, if (Principal office address MUST BE A ST	r the designation "Corp," "In "professional association," of applicable:	nc," or "Co". A professional corp	or the voration
C. Enter new mailing address, if application (Mailing address MAY BE A POST O	able:	N/B	
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:	3	
Name of New Registered Avent:		1/P	
New Registered Office Address:	(Florida street	address)	
		. Florida	

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

(Zip Code)

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)

Title .	Name	Address	Type of Action
D	AUDREINA MION-Bet	MIAMI, FL 3318	Add Remove
			Add Remove
			Add Remove
	nding or adding additional Articles, enter eadditional sheets, if necessary). (Be specific		
	imendment provides for an exchange, recla		
	ions for implementing the amendment if no not applicable, indicate N/A)		uscii:
	70 / 12		
			

~ FROM ∶A	CCOUNTING OFFICE	FAX NO	:3054481648	Jul.	17 2009	11:01AM	P4
The c	late of each amendmen	(s) adoption:	of adoption is regulred)	2009			
Effective date <u>if applicable</u> :	(date	of adoption is required)					
Litte	rive date <u>il abblicanie</u> .	(no more than 90 days o	fter amendment file date)			-	
Adop	ntion of Amendment(s)	(CHECK O	<u>NE</u>)				
Σ τι	he amendment(s) was/wo y the shareholders was/w	re adopted by the sharehoere sufficient for approval	lders. The number of vot	tes cast for the	amendme	nt(s)	
		re approved by the shareh d for each voting group e				ement	
	"The number of votes	cast for the amendment(s) was/were sufficient for a	approval			
	by	(voting group)	#9				
		(voting group)					
	ne amendment(s) was/we ction was not required.	re adopted by the board o	f directors without shareh	older action a	nd shar c ho	lder	
	ne amendment(s) was/wo tion was not required.	re adopted by the incorpo	rators without shareholder	r action and sl	nareholder		
	Dated	7/14/20	D9				
		Bi	M				
	Signature <u>1</u> (By	a director, president or of	her officer - if directors of	officers hav	e not been	,	
	sele	cted, by an incorporator -	if in the hands of a receiv			rt	
	арр	pinted fiduciary by that fi	fuciary)				
		FAB	10 M 100 F	Bet			
		(Typed or pr	inted name of person sign	ning)			
		Po	resident				
		(Title of person	signing)				