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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION DOCUMENT NUMBER:	RAH	IIM GROUP I K41010	NC			
The enclosed Articles of Amer	ndment and fee are sub	omitted for filing.				
Please return all corresponden	ce concerning this mat	ter to the following:				
	OL	GA VOLCHE	K			
		Name of Contact Persor				
	40.74.7	Firm/ Company				
43 BURNING BUSH DRIVE,						
	PALM (Address COAST, FL 32	2137			
		City/ State and Zip Code	2			
	VORONK	OVA@DENF	RUS.RU			
E-	mail address: (to be us	ed for future annual report	notification)			
For further information concer	ning this matter, pleas	e call:				
OLGA V	OLCHEK	_{at (} 386	447-1609			
Name of Conta	ct Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the fol	lowing amount made p	ayable to the Florida Depa	artment of State:			
	\$43.75 Filing Fee & Certificate of Status	L\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation

FILED

RAHIM GROUP INC		b thinke he				
	11.	DEC	- 1 0 -	- 1.4.5	2. 1	٠,
(Name of Corporation as currently filed with the Florida Dept. of State)	14	טננ	IJ	TI.	2: 3) (
K41010	11.	VI.(5 1 3	ء ۾ د	65 J	r a se s	

(Document Number of Corporation (if known)

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: N/A		
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must co	
B. Enter new principal office address, if applicable:	43 BURNING BUSH DRIVE,	
(Principal office address MUST BE A STREET ADDRESS)	PALM COAST, FL 32137	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	43 BURNING BUSH DRIVE,	
(Maning duniess MATA BE AT 1 651 611162 BOT)	PALM COAST, FL 32137	
new registered ag ent and/or the new registered of fice addre		
Name of New Registered Agent 43 BURNING	SSE VOLCHEK G BUSH DRIVE	
Name of New Registered Agent 43 BURNING	OLCHEK BUSH DRIVE Street address) T, Florida	

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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Т		Marja-Liisa Sadik-Ogli	120 NO. M STREET
Add		_		LAKE WORTH, FL 33460
Remove				
2) Change	V	_	Nikolai Sadik-Ogli	475 27TH AVE., APT. # 4
Add				SAN FRANCISCO,
Remove				CA 94121
3) Change	S		Olga Volchek	43 BURNING BUSH DR.,
Add				PALM COAST, FL 32137
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		·
Add		_ _		
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here:
N/A	(De specific)
	
<u> </u>	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
-	

date this document was signed. Effective date if applicable:	_
Effective date if applicable:	_
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated05 December 2014	
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 court appointed fiduciary by that fiduciary)	_
ALEXANDER NOVOZHILOV	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_