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R. WHITE MAY 11 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: RATION	9914106	CENTER, INC.			
DOCUMENT NUMI	BER:P/2	0000 699	79			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
•	SAMUEL	ALSOP				
	Name of Contact Person					
	RY TECH -	TRAINING C	ENTER, Idc.			
		rinn/ Company				
	SAMUEL ALSOT Name of Contact Person RV TECH TRAINING CENTER, INC. Firm/ Company 4455 ULMENTON. AD Address					
		Address				
	CLEANWATE	n A 33	762			
	<u></u>	City/ State and Zip Cod	e .			
	RV TOPINIOLE CE-mail address: (to be us	ed for future annual report				
For further information	n concerning this matter, pleas	se call;				
MIT	SYLYA	at (<u>8/3</u>	de & Daytime Telephone Number			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	artment of State:			
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
7. W		Q 4	Address			

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

to Articles of Amendment
, , ,
Articles of Incorporation of 18 HAY -8 PH 3: 21
(Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Dept. of State)
P/2000069979
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
DV TECH TURISHER CENTER INC. THE TOWN
RV TECH TAPINING CENIEN, 1 NC. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: 4455 44 MERION RD
Control of the Action of A
(Principal office address MUST BE A STREET ADDRESS) CLEAR WATEN, FL 33762
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) 7455 LICINE (1) EN OC. D.
CLEARWATER, PL 33762
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:
\mathcal{N}/\mathcal{A}
Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Posistered Agent if changing

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)

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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>	Address
l) Change		<u> </u>	/A
Add			•
2) Change			
Add			
3) Change			**************************************
Add			
Remove			
4) Change			
Add			
· Remove			
5) Change			
Add			
Remove			
6) Change			
Add ·			
Remove			

	if necessary). (Be specific)	
	H/A	
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n amendment provide	es for an exchange, reclassification, or can	cellation of issued shares,
<u>ovisions for implemen</u>	ting the amendment if not contained in the	cellation of issued shares, e amendment itself:
n amendment provide ovisions for implemen (if not applicable, ind	ting the amendment if not contained in the licute N/A)	cellation of issued shares, e amendment itself:
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The date of each amendment(s) adoption:	4/1/2018	, if other than the
date this document was signed.	, ,	
Effective date if applicable:	more than 90 days after amendment file date)	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State		s, this date will not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
The amendment(s) was/were adopted by the sharel by the shareholders was/were sufficient for approve	holders. The number of votes cast for the ameral.	ndment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group		
"The number of votes cast for the amendmen	at(s) was/were sufficient for approval	
by(voting gr		
(voting gr	coup)	
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and sh	areholder
The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action and shareh	older
Dated 4/30	12018	
Signatura	Dlino	
(By a director, president of	or other officer - if directors or officers have n	ot been
` ,	tor - if in the hands of a receiver, trustee, or of	
appointed fiduciary by th	at fiduciary)	
9 A M 4 E	1 A/-San	
(Typec	d or printed name of person signing)	
PARSIT	(Pitle of person signing)	
	(Title of person signing)	