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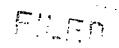


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Reliat	ex, Inc.			
DOCUMENT NUMBER:					
The enclosed Articles of Amenda	ent and fee are submit	ted for filing.			
Please return all correspondence	concerning this matter t	o the following	g:		
	Philip	Miller			
 -	Name of Contact Person				
		ex, Inc.			
 -	·	Firm/ Comp	pany		
	2201 N	.W. 72 A	٧e.		
		Address			
Miami, FL 33122					
	C	ity/ State and Z	Zip Code		
	miami@	reliatex	(.com		
E-mai	l address: (to be used for			notification)	
For further information concerning	g this matter, please ca	H:			
Philip Mille	r	at (30)5) 592-3220	
Name of Contact Person				e & Daytime Telephone Number	
Enclosed is a check for the follow	ing amount made paya	ble to the Flori	ida Depai	rtment of State:	
•	ificate of Status	\$43.75 Filing Certified Copy Additional cop enclosed)	,	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations		Division The Cer 2415 N	address nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810 see, FL 32303	

Articles of Amendment to Articles of Incorporation of



	2021. • •	
(Name of Corporation as currently fil	ed with the Florida Dept. of State)	5 11 :12
(Document Number of Co	rporation (if known)	
tursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> is Articles of Incorporation:	cida Profit Corporation adopts the follow	wing amendment(s)
a. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "comp Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro- chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbrevi ofessional corporation name must con	The new atton "Corp.," attain the word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
_ -		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	
Name of New Registered Agent		
(Florida street a	ddress)	
New Registered Office Address:	, Florida	
(City	(2	(ip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position	en.
Signature of New Regis.	tered Agent, if changing	
heck if applicable		

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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) Change	S_	Robert Neil Miller	6004 Bonacker Dr.
X Add			Tampa, FL 33610
Remove			
2) X Change	TDD	Philip R. Miller	2201 NW 72 Ave.
Add			Miami, FL 33122
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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andment pro	vidas far an a	rchange re	classificatio	n ar cancalls	ntion of issue	d charac	
ons for imple	menting the a	<u>mendment i</u>	if not contai	ned in the ar	nendment its	elf:	
101 applicable	, indicate N/A)						
						•	
		<u> </u>					
 .							
C	ons for imple	ons for implementing the a	endment provides for an exchange, reports for implementing the amendment inot applicable, indicate N/A)	ons for implementing the amendment if not contain	ons for implementing the amendment if not contained in the ar	ons for implementing the amendment if not contained in the amendment its	endment provides for an exchange, reclassification, or cancellation of issued shares, one for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)

•

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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, thi document's effective date on the Department of State's records.	s date 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 was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following star must be separately provided for each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
Signature (By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary) Philip R. Miller	
(Typed or printed name of person signing)	
Treasurer/Director	
(Title of person signing)	