## 627817

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: RELIABLE FIRE	& SAFETY EQUIPMEN	T COMPANY, INC.
DOCUMENT NUME	G27817		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	Inessa Kramer		
		Name of Contact Perso	n
		Firm/ Company	
	4613 N University Drive #6	808	
	Coral Springs, FL 33067	Address	
		City/ State and Zip Cod	e
enna	k3@gmail.com		
<del></del>	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, plea.	se call:	
Ken Kramer		at (954	471-6709
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is cnclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor	Address  Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

RELIABLE FIRE & SAFETY EQUIPM	MENT COMPANY, INC	C.	
( <u>Name</u>	of Corporation as cur	rently filed with the Florida D	Dept. of State)
G27817			
	(Document Numb	ber of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes,	this Florida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation	n <u>:</u>	
E&K F Enterprises Group Inc.			The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc,"	or "Co". A professional corp	orporated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4972 NW 105th Drive	
		Coral Springs, FL 330	76
D. If amending the registered agent as new registered agent and/or the new Name of New Registered Agent		dress:	name of the
	(Florie	da street address)	
New Registered Office Address:	Coral Springs	·	Florida 33076
New Registered Office Address.	·	(City)	(Zip Code)
New Registered Agent's Signature, if of the I hereby accept the appointment as regis	stered agent. I am fami		12.

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:

1.

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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) X Change	PRES	KRAMER, KENNETH S.	4972 NW 105th Drive	
Add			Coral Springs, FL 33076	
Remove				
2) X Change	VP	KRAMER, INESSA	4972 NW 105th Drive	
Add			Coral Springs, FL 33076	
Remove			<del></del>	
3 ) Change		<u> </u>		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			<del></del>	
Remove				
6) Change				
Add			10.90000	
Remove				

E. If amending or as (Attach additional	dding additional Artic sheets, if necessary).	cles, enter change( (Be specific)	<u>s) here</u> :		
NIH					
·	<b>.</b>			· · · · · · · · · · · · · · · · · · ·	
				<del>-</del> ·	
<del></del>			<del></del>		
provisions for in (if not applie	provides for an exchangementing the americable, indicate N/A)	ange, reclassificati idment if not cont	on, or cancellation ained in the amend	of issued shares, Iment itself:	
NIR		· · ·			
				·	
			•		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
August 1, 2018	
Effective date if applicable:	
(no mor	e than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendate.	e applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u> )
The amendment(s) was/were adopted by the shareholde by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehol- must be separately provided for each voting group en	
"The number of votes cast for the amendment(s)	was/were sufficient for approval
bv	,,
(voting group	)
☐ The amendment(s) was/were adopted by the board of daction was not required.	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporate action was not required.	ors without shareholder action and shareholder
Dated Oct blo d	018,
Signature Samulli	Kacom-
(By a director, president or of	her officer – if directors or officers have not been
	if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fi	duciary)
KENNE	th KRAMER
(Typed or	printed name of person signing)
Pre	SiDent
<del>.</del>	(Title of person signing)

1.