P04000104054

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: RAFI HOLDING CORPORATION DOCUMENT NUMBER: P 0400004054.
DOCUMENT NUMBER: POYOOLOYOSY,
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NICHOLAS GARGA
RAST HOLDING CORPORATION Firm/Company
1835 East HALLANDAME BEACH 13 WO
1835 East HALLANDANE BEACH 13 We muit 158, HALLANDANE BEACH, PL 330
City/ State and Zip Code alex moving agmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: NiCHOLAS GARCIA at 454, 639-6906
Name of Contact Person at (454) 639-6906, Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
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

Articles of Amendment
10
RAF: HOLDING COMPORATION
(Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Bept. of State) POYOD 10405 Y (Document Number of Corporation (if known)
(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:
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: (Principal office address MUST BE A STREET ADDRESS) BEACH BWd, unt 158 HALLANDALE BEACH, FL 23009.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) BEACH Blud, UNT 158, HALLANDALE BEACH, FL 33009
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:
Name of New Registered Agent Ni CHOLAS GARCIA.
183 S EAST HALLANDAME BLACK Blvd,
(Florida straet paddress) And Ale BLACK, Pl 33009.
New Registered Office Address:, Florida
New Registered Office Address: 1835 E. HASILIAN d ALE BEACH, PL 33009. New Registered Office Address: 1835 E. HASILIAN d ALE BEACH, PL 33009. BEACH BUD, #158, HALLAND ALP BEACH, PL 3300
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agen am familiar with and accept the obligations of the position.
Signature of New Registered 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)

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> <u>John</u>	<u>Doe</u>				
X Remove	<u>V</u> <u>Mike</u>	Mike Jones				
X Add	<u>SV</u> <u>Sally</u>	Smith				
Type of Action (Check One)	<u>Title</u>	Name	Ado	<u>dres</u> s		
1) Change Add Remove	PD	TRINA	ERMANOU PR	1428 SE 4.	WY HB-112 MH, PL MY),	
2) Change Add Remove	PD	Nicholas	GALCA I	835 E. HALLI EACH BWA LLANDIP BR	ACH, FL, 33009	
3) Change Add Remove					33009	
4) Change Add Remove						
5) Change Add Remove					_	
6) Change Add Remove						

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	n/9	
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If an amendment provides for an excl provisions for implementing the ame	hange, reclassificatio	n, or cancellation of issued sha ined in the amendment itself:	res,
(if not applicable, indicate N/A)		ula	
		4	
		79	

The date of each amendment(s) adoption: $07/12/2012$,
Effective date if applicable: 07/12/2012.
(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)
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.
Dated
(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)
Nicholas GARCIA
(Typed or printed name of person signing)
Presideni
(Title of person signing)