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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RB ST-	iping Inc
DOCUMENT NUMBER: POHOGO !	61464
The enclosed Articles of Amendment and see are sub	omitted for filing.
Please return all correspondence concerning this matt	ter to the following:
1-1	A
	Name of Contact Person
KB Str	Ping Inc Firm/ Company
6626 51	Ludow Oak LN
	Address
orlands	Address FL 32809 City/ State and Zip Code
	City/ State and Zip Code
Regiro be ce.	rra @ Yn hoo. Com ed for future annual report notification)
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please	e call:
Lida Becerra	at (407) 340 - 5275 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
	11 . 4 . 11 . 1 . 1
Enclosed is a check for the following amount made p	bayable to the Florida Department of State:
✓ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee
Certificate of Status	Certified Copy Certificate of Status
	(Additional copy is Certified Copy
•	enclosed) (Additional Copy
	is enclosed)
Matting Address	C44 4 J.J
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 13 APR 12 AM II: 41

	Inc	JALLAHASSEE FLORINA
(Name of Corporation as currently	filed with the Florida Dept. of State)	" HECHINASSEE, HEORDA
P04000161	464	
	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flor as Articles of Incorporation:	rida Statutes, this Florida Profit Corporate	ion adopts the following amendment(s)
If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	orp," "Inc," or "Co". A professional co	corporated" or the abbreviation
3. Enter new principal office address, if applical Principal office address <u>MUST BE A STREET A</u>	ble: DDRESS)	
metput office undress <u>regor 1937 1811 1811 181</u>		
C. Enter new mailing address, if applicable:	POI!	
(Mailing address MAY BE A POST OFFICE I	<u></u>	
•		· <u>.</u>
D. If amending the registered agent and/or regis	stered office address in Florida, enter th	e name of the
new registered agent and/or the new register	ed office address:	•
Name of New Registered Agent		
	(Florida street address)	
	r.	15. 24.a.
New Registered Office Address:	(City)	orida (Zip Code)
	(• •
		<i>,</i>
New Registered Agent's Signature, if changing F	Registered Agent:	
l hereby accept the appointment as registered agen		gations 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	PT Johr	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> </u>	Biyant Becerry	6626 Studow Oak Ln
X Add			Orlando FL 32809
Remove			
2) Change	VP.	Regino Becerra	6626 shulow Oak L
X Add	· · · .		orludo FL 32809
Remove			
3) Change	•	,	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<u>, ,</u>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	·
(if not applicable, indicate N/A)	·
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s) a	doption: 4-10-13
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more man 30 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ade action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 4-	10-2013
Signature	Lida Bereva
	firector, president or other officer - if directors or officers have not been
	ed, by an incorporator — if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)
шрро	Life Berenn
	(Typed or printed name of person signing)
	DP.
	(Title of person signing)