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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	FION: <u>RYNC7A</u>	PRODUCTION) /NC.
	r: <u>P06000069</u>		<u> </u>
The enclosed Articles of A	Amendment and fee are su	ibmitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
	RYAN	GONZALEZ	-
_		Name of Contact Person	
	RYN	CTA PRODUCT	TIONS, INC.
	<u> </u>	Firm/ Company	
	32607	Natural Br	idge Rd.
		Address	
	Wesley	Chapel, Fa	<u>33543</u>
	,	City/ State and Zip Co	de
	E-mail address: (to be us	Production do for future annual repor	15@gmail.com
For further information co	oncerning this matter, pleas	se call:	
<u></u>	JUNZALEZ	at (305	, 804-5662
Name of C	Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Dep	partment of State:
\$35 Filing Fee	S43.7. Fiting Fee & Certificate of Status	\$43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailine	a Address	Stran	t Addraec

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

Articles of Incorporation of

FILED

(Name of Corporation as currently filed with the Florida Dept; of State) TIME PO600069897 TALLARA FEELENA (Document Number of Corporation (if known)

A. If amending name, enter the new name of the corpo	oration;
THE TOUCHSTONE	E COLLECTIVE, INC. The new
name must be distinguishable and contain the word '	'corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	Wesley Chapel, F2 33543
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	32607 Natval Bridge Rd. Wesley Chapel, Fr 33543
). If amending the registered agent and/or registered new registered agent and/or the new registered offinew. Name of New Registered Agent	
	ice address:
new registered agent and/or the new registered off	
new registered agent and/or the new registered off	(Florida street address)
new registered agent and/or the new registered offi Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered	(Florida street address) Florida (City) (Zip Code)
new registered agent and/or the new registered offi Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered	(Florida street address) Florida (City) (Zip Code)
new registered agent and/or the new registered offi Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered	(Florida street address) Florida (City) (Zip Code)

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.

X Change	<u>PT</u>	<u>John Doe</u>		NO CHANE	F(
X Remove	$\underline{\mathbf{V}}$	Mike Jone	<u>·s</u>	Mo CITADO	
X Add	<u>SV</u>	Sally Smit	<u>h</u>		
Type of Action (Check One)	<u>Title</u>	N	lame		Address
1) Change			<u>, , , , , , , , , , , , , , , , , , , </u>		
Add					
Remove					
2) Change					
Add					
Remove					
3)Change					
Add					
Remove					
4) Change			· · · · · · · · · · · · · · · · · · ·	<u>.</u> ., — -	
Add					
Remove					
5) Change		 –			
Add					
Remove					
6) Change					
Add					• • • • • • • • • • • • • • • • • • • •
Remove					

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n amendment	provides for an ex	change, reclassi	ification, or car	icellation of iss	ued shares.	
<u>ovisions for in</u>	nplementing the arable, indicate N/A)	nendment if not				
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The date of each amendment(s) adoption: date this document was signed.	6/1/2018	, it other than
Effective date if applicable:	7 1 2018 (no more than 90 days after amendment file date	?)
Note: If the date inserted in this block does not document's effective date on the Department of	ot meet the applicable statutory filing requirement State's records.	ats, this date will not be listed as
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes cast for the ampproval.	endment(s)
	shareholders through voting groups. The following group entitled to vote separately on the amendme	
"The number of votes cast for the amen	dment(s) was/were sufficient for approval	
by(voti	ing group)	
	poard of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the i action was not required.	incorporators without shareholder action and share	cholder
	dent or other officer – if directors or officers have rporator – if in the hands of a receiver, trustee, or	
	Typed or printed name of person signing) (Title of person signing)	

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