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SECRETARY OF STATE A

Amend Cus (10 5/4/10)

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: Rapid Restoration Sexuices INC. |
|---|
| DOCUMENT NUMBER: <u>P0600132651</u> |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Melinda Oxfiz Name of Contact Person |
| Rapid Restoration Services INC Firm/ Company |
| 23110 State Road 54 Unit 274 Address |
| Lutz, F1. 33549-6933 City/ State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Roul Robriguez at (8/3) 792-7374 Name of Contact Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| S35 Filing Fee Scrifficate of Status S43.75 Filing Fee Scriffied Copy (Additional Copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle |

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2010

MELINDA ORTIZ RAPID RESTORATION SERVICES, INC. 23110 STATE ROAD 54 - UNIT 274 LUTZ, FL 33549-6933

SUBJECT: RAPID RESTORATION SERVICES, INC.

Ref. Number: P06000132651

We have received your document for RAPID RESTORATION SERVICES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

PLEASE CHECK ONLY ONE BOX IN REFERENCE TO THE ADOPTION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 310A00010448

Articles of Amendment to Articles of Incorporation of

| Rapid Restorati | ION SETVICES INC. | |
|---|---|---------------------------------|
| (Name of Corporation as cu | ION SETVICES INC. urrently filed with the Florida Dept. of State) | |
| P0600013269 | 51 | |
| (Document N | Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation | 1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts n: | the following |
| A. If amending name, enter the new name | e of the corporation: | |
| | | The new |
| abbreviation "Corp.," "Inc.," or Co.," or | in the word "corporation," "company," or "incorporated' the designation "Corp," "Inc," or "Co". A professional corp professional association," or the abbreviation "P.A." | |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR.) | | |
| C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF | | SECRE II TALLAHA 10 MAY - |
| D. If amending the registered agent and/o new registered agent and/or the new re | | ARY OF ST SSEE, FLO |
| Name of New Registered Agent: | Johnny Oxtiz | Ser Per |
| New Registered Office Address: | 23110 State Road 54 Unit 274 (Florida street address) | |
| | Lutz Florida 3354 (City) (Zip Code) | 2-6933 |
| New Registered Agent's Signature, if chan I hereby accept the appointment as registered. | nging Registered Agent: ad avent. I am familiar with and accept the obligations of the p Signature of New Registered/Agent, iffchanging | osition. |

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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---|---|----------------|
| President | Roul Rodriguer | 23/10 State Road 54 Watet 27 Lutz, F1 - 33549 | |
| President | Melinda Ortiz | 23110 State Road 54 UNIT 274 Lutz, F1. 33549 | |
| President | Johnny Ortra | 23/10 State Road 53 | Add Remove |
| | ng or adding additional Articles, enter itional sheets, if necessary). (Be specif | • | |
| Chan | ge FEI Number | To: 80.0589 | 7255 |
| | | ., | |
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| | | | |
| provision | ndment provides for an exchange, recl s for implementing the amendment if a applicable, indicate N/A) | | |
| | | | |
| | | | |
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| | | | |
| | | | |

| The date of each amendment(s) adoption: | | | |
|---|---|--|--|
| recention data is applicable. | (date of adoption is required) | | |
| Effective date if applicable: (no more than 90 days after amendment file date) | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| The amendment(s) was/wer by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. | | |
| | re approved by the shareholders through voting groups. The following statement d 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) | | |
| action was not required. | re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder | | |
| Dated | 7 00 0 | | |
| sele | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | | |
| | Raul Robyiguez (Typed or printed name of person signing) | | |
| | Z | | |