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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Restaurant Purcha	sing Solutions, INC.	
DOCUMENT NUM	BER: <u>P06000134885</u>		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	uter to the following:	
	John Prindiville		
		Name of Contact Person	n
	Buyers Edge Platform		
		Firm/ Company	
	307 Waverley Oaks Rd. S	• •	
		Address	
	Waltham, MA 02452		
		City/ State and Zip Cod	e
	john.prindiville@buyersed	lgeplatform.com	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
John Prindivi	ille	at (617	, 275-8430 ext. 197
Name	of Contact Person	at (617) 275-8430 ext. 197 Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Restaurant Purchasing Solutions, INC.

(Name of Corporation	on as currently filed with the Florida Dept. of State)	
P06000134885		
	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amenda	ient(s) t
A. If amending name, enter the new name of the co	orporation:	
RPS OLDCO, Inc.	The ne	
name must be distinguishable and contain the word "Corp" "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the a	d "corporation," "company," or "incorporated" or the abbreviatio ," "Inc," or "Co". A professional corporation name must contain to abbreviation "P.A."	in ic
B. Enter new principal office address, if applicables (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	X)	FILED
D. If amending the registered agent and/or register new registered agent and/or the new registered of Name of New Registered Agent		
	(Florida street address)	
New_Registered Office Address;	. Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.	
Sione Sione	ature 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>	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sm	<u>rith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_ _		
Add				
Remove				·
5) Change				
Add	_	_		
Remove				
6) Change				
Add				
Remove				

	(Be specific)
<u> </u>	
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
	ndment if not contained in the amendment itself:
provisions for implementing the amer	
(if not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amera (if not applicable, indicate N/A)	.
tif not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	
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provisions for implementing the amera; (if not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

date this document was signed.
Effective date if applicable: April 5, 2019
Effective date if applicable: April 5, 2019 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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
☐ 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 10/11/2019
Simony Lagratta
Signature Anthony Lagratta (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)
Anthony Lagratta
(Typed or printed name of person signing)
Incoroporator, President
(Title of person signing)