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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: R&D Payers Inc				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Ricardo M. Oliveina				
Name of Contact Person				
N/A				
17428 Ingram KD				
Fort Myers, Plotida 33967 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Ricardo M. Oliveina at 239 8106079				
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:				
\$35 Filing Fee 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 AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment

Artic	cles of Incorporation	n		
RED	Pages In	ın.		
(Name of Corporation as currently filed y	with the Florida Der	ot. of State)	······································	
	137685			
(Document Number of Cor				
Pursuant to the provisions of section 607.1006, Florida Stat		ofit Corporation add	opts the following a	mendment(s) to
its Articles of Incorporation:				
A. If amending name, enter the new name of the corpor	ration:			
	M M		· •	he new
name must be distinguishable and contain the word "c" ("Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	Inc," or "Co". A pi	oany," or "incorpor rofessional corporat	ated" or the abbi	reviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		FILED to OCT 24 MI
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office		rida, enter the name	of the	9. 52
Name of New Registered Agent	NM			
	(Florida street address)			
New Registered Office Address:	(City)	, Florida_	(7in Cada)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: familiar with and acc		(Zip Code) of the position.	
Signature of New Re	egistered Agent, if cha	anging		

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	D	Arauso, Marchenan	4259 Bella Sol Cir # 2020 Fort Myers 12 33916
2) Change		 	
Remove 3) Change Add			
Remove			
4) Change Add Remove			
5) Change			
Remove			
6) Change			
Remove			

ttach additional sheets, if necessary). (Be specific)	
\ \ \ \	
X	
	_
	<u> </u>
	cancellation of issued shares
an amendment provides for an exchange, reclassification, or	CHICCHARDI OF ISSUED STREET
rovisions for implementing the amendment if not contained i	in the amendment itself:
an amendment provides for an exchange, reclassification, or rovisions for implementing the amendment if not contained if (if not applicable, indicate N/A)	in the amendment itself:
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an amendment provides for an exchange, reclassification, or provisions for implementing the amendment if not contained in (if not applicable, indicate N/A)	in the amendment itself:
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rovisions for implementing the amendment if not contained i	In the amendment itself:
rovisions for implementing the amendment if not contained i	in the amendment itself:
rovisions for implementing the amendment if not contained i	in the amendment itself:

The date of each amendment(s) adoption	:10/19/2013	, if other than the
date this document was signed.		
Effective date if applicable:	10/19/2013	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.	
	by the shareholders through voting groups. The following statement of the 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 action was not required.	the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder	
Dated 10/3	19/2013	
Signature (Rya Media)	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 fiduo	ciary by that fiduciary)	
	Ricardo Olmena	
	(Typed or printed name of person signing)	
	PD	
3	(Title of person signing)	_