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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2020

MAGDIEL ROSARIO ROSEBAY INTERNATIONAL, INC. 1815 S OSPREY AVE SARASOTA, FL 34239

SUBJECT: ROSEBAY INTERNATIONAL, INC.

Ref. Number: P06000144375

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

PLEASE COMPLETE THE FLORIDA PROFIT CORPORATION FORM PROVIDED AND RESUBMIT ALL OF THE INCLUDED PAGES.

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) 245-6050.

Letter Number: 820A00009316

Susan Tallent Regulatory Specialist II

www.sunbiz.org



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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2020

MAGDIEL ROSARIO ROSEBAY INTERNATIONAL, INC. 1815 S OSPREY AVE SARASOTA, FL 34239

SUBJECT: ROSEBAY INTERNATIONAL, INC.

Ref. Number: P06000144375

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

AN UPDATED AMENDMENT FORM PURSUANT TO SECTION 607.1006, FLORIDA STATUTES WAS REVISED FOR THE YEAR OF 2020 THROUGH LEGISLATIVE ACTION. PLEASE ENSURE THAT THIS UPDATED FORM IS USED FOR FUTURE CHANGES.

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) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 520A00007366

COVER LETTER

Division of Corporations			
NAME OF CORPORATION: ROSEBAY INTERNATIONAL, INC. DOCUMENT NUMBER: P06000 1443 75			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MAGGIEL MIKE ROSARIO Name of Contact Person ROSEBAY INTERNATIONAL, INC Firm/ Company 1815 S OSPREY AUE Address SARASOTA FL. 34232 City/ State and Zip Code MROS 0400 D AOL. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
MAG diel Mike" Rosario at (941) 650-0338 Name of Contact Person Area Code & Daytime Telephone Number			
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 Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)			

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

ROSEBAY INTERNA		
	urrently filed with the Florida Dept. of State)	
P060014143 3	mber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:		llowing amendment(s) to
A. If amending name, enter the new name of the corporation of the corp	Restly, INC	The new
name must be distinguishable and contain the word "corporation". Inc.," or Co.," or the designation "Corp.," "Inc.," or "Contain the abbreviation "chartered," "professional association," or the abbreviation	20". A professional corporation name must	eviation "Corp.," contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		202
C. Enter non-matting address if anytically	,	2020 JUN 29
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
TN 16 mm and the state of the s		. 23
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office at		
Name of New Registered Agent	/A	
- Gila	orida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		cition,
	New Registered Agent, if changing	
Signature of .	New Registered Agent, if changing	

Check if applicable

 $[\]square$ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			1.1/
Pamaya			

If amending or a (Attach additional	ding additional Articlesheets, if necessary).	ies, enter change(s) (Re specific)	<u>) here</u> :		
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The date of each amendment(s) adoption: _date this document was signed.	6/23/20	, if other than the
Effective date if applicable:	6/23/20	10 (1 d d d d d d d d d d d d d d d d d d
	(no more than 90 days after amendmen	a pie aase)
Note: If the date inserted in this block does document's effective date on the Department of		equirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	e shareholders. The number of votes cast r approval.	for the amendment(s)
The amendment(s) was/were approved by to nust be separately provided for each voting		
"The number of votes cast for the am	endment(s) was/were sufficient for approx	ral
by	Ning group)	
Dated	20 (20)	
Signature		
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appointed fiducia	ry by that fiduciary)	
$\mathcal{N}_{\mathcal{I}}$	Agdie/Mike Ros (Typed or printed name of person signing	ARio
	(Typed or printed name of person signing	<u>;</u>)
	TRESIDENT	
	(Title of person signing)	