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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: R.S.V.P. MANAGEMENT SERVICES, INC. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BARBARA HIRSCH Name of Contact Person R.S.V.P. MANAGEMENT SERVICES, INC. Firm/ Company 8128 CEDAR CREEK DRIVE Address **NEW PORT RICHEY, FL 34653** City/ State and Zip Code bhirsch3@tampabay.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727 484-6282

Area Code & Daytime Telephone Number **BARBARA HIRSCH** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) 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** Articles of Incorporation ·of

	Articles of A	Amendment	
	to Antiolog of In	on the second se	1
	Articles of In	f	
R.S.V.P. MANAGEMENT SERVICES,			6
(Name o	f Corporation as current	tly filed with the Florida Dept. of State)	The 'C
P10000009950		The state of the s	TILED 1800 35
	(Document Number of	of Corporation (if known)	<u>्र</u>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new na	me of the corporation:		
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address,	if applicable:	8128 CEDAR CREEK DRIVE	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		NEW PORT RICHEY, FL 34653	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8128 CEDAR CREEK DRIVE	
		NEW PORT RICHEY, FL 34653	
D. If amending the registered agent an new registered agent and/or the ne			
Name of New Registered Agent		<u> </u>	
	8128 CEDAR CREEK D	DRIVE	
	(Florida s	treet address)	
New Registered Office Address:	NEW PORT RICHEY	, Florida 34653	
·		(City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: with and accept the obligations of the position.	
<del></del>	Signature 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 <math>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>	<u>Name</u>	Address
1)Change			
Add			
Remove			
2) Change	·	<u> </u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	<u> </u>
	_
f an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself:	<u>'S,</u>
(if not applicable, indicate N/A)	
•	

07/15/2016	
The date of each amendment(s) adoption:	other than the
date this document was signed.	
07/15/2016	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	e listed as the
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 ."	
by"  (voting group)	
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.	
07/15/2016	
Dated	
Signature Daybara Ausch	16
(By a director, president or other officer – if directors or officers have not been	<u>_</u>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	8
BARBARA HIRSCH	- CD ; - DD [1]
(Typed or printed name of person signing)	
(1 Abor or brusten name or berson signing)	
President	35
(Title of person signing)	