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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Rhiny Corp | • |
|--|---|
| DOCUMENT NUMBER: P10000030277 | |
| The enclosed Articles of Amendment and fee are s | submitted for filing. |
| Please return all correspondence concerning this m | natter to the following: |
| Joan Mann | |
| Name of C | ontact Person |
| Rhiny Corp. | |
| | Company |
| 1225 South Highland Av | ve. #317 |
| | dress |
| Clearwater, FL 33756-4 | 1387 |
| | and Zip Code |
| ivmlaw@vahoo.com | • • • |
| jxmlaw@yahoo.com E-mail address: (to be used for | r future annual report notification) |
| For further information concerning this matter, plea | ase call: |
| Joan Mann | _at (727) 449-9444 |
| Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made | e payable to the Florida Department of State: |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) \$\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | Street Address |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations |
| P.O. Box 6327 | Clifton Building |
| Tallahassee, FL 32314 | 2661 Executive Center Circle Tallahassee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

| Rhiny Corp. | | | |
|--|---------------------|--|------------------------|
| (Name of Corporation as curr | rently filed with t | the Florida Dept. of Sta | <u>te</u>) |
| P10000030277 | | | |
| (Document Nu | mber of Corporati | ion (if known) | |
| Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provisions of section 607.100 following amendment(s) to its Articles of Incompared to the provision of the provision following the provision follows are also between the provision of the p | | tes, this <i>Florida Profit</i> (| Corporation adopts the |
| A. If amending name, enter the new name of | of the corporation | <u>n:</u> | |
| The new name must be distinguishable of "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A." | "Inc.," or Co., | ," or the designation "(| Corp," "Inc," or |
| B. Enter new principal office address, if app (Principal office address MUST BE A STREE | | 1225 South Highla | nd Ave. #317 |
| (Frincipal Office address MOST BE A STREE | et address) | Clearwater, FL | 33756-4387 |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) | | | SEURE TARY OF SHAPON |
| D. If amending the registered agent and/or new registered agent and/or the new regi | • | · ··· · · · · · · · · · · · · · · | 27 |
| Name of New Registered Agent: | Joan Mann | | _ |
| | 1225 South I | Highland Ave. #317 | |
| New Registered Office Address: | | da street address) | - |
| | Clearwater, | | , Florida 33756 |
| | | (City) | (Zip Code) |
| New Registered Agent's Signature, if changi I hereby accept the appointment as registered position. | d agent. I am f | gent: familiar with and accept Augustian with and accept Registered Agent, if chan | |

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

| Title(s) | Name | | Address | |
|----------------------|---|----------------------|------------------------------|-------------|
| 1)Pres | Joan Mann | 1225 | South Highland Ave. #317 | |
| -/ | | Clearw | ater, FL 33756-4387 | |
| | | | | |
| 2) | | | | |
| | | | | |
| 3) | | | | |
| 3) | | | | |
| | • | | | |
| 4) | William I I I I I I I I I I I I I I I I I I I | | | |
| | | | | |
| 5) | | | | |
| <u></u> | | | | |
| | | | | |
| 6) | | | | |
| | | | | |
| | | | | |
| If REMOVING removed: | an officer and/or director, pleas | se list the title(s) | and name of the officer/dire | ector to be |
| Title(s) | <u>Name</u> | Title(s) | <u>Name</u> | |
| 1)Pres | Manekofsky, Alan M. Drs. | 4) | | |
| 2) <u>V.P.</u> | Story, Caryl | 5) | | |
| 3) | | 6) | | |

| attach additional sheets, if necessary). | . (Be specific) |
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| If an amendment provides for an ex | xchange, reclassification, or cancellation of issued shar |
| If an amendment provides for an exprovisions for implementing the am (if not applicable, indicate N/A) | xchange, reclassification, or cancellation of issued shar nendment if not contained in the amendment itself: |
| provisions for implementing the am | xchange, reclassification, or cancellation of issued shar nendment if not contained in the amendment itself: |
| provisions for implementing the am | schange, reclassification, or cancellation of issued shar nendment if not contained in the amendment itself: |
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| provisions for implementing the am | xchange, reclassification, or cancellation of issued shar nendment if not contained in the amendment itself: |
| provisions for implementing the am | xchange, reclassification, or cancellation of issued shar nendment if not contained in the amendment itself: |

| The date of each amendmen | t(s) adoption: November 1, 2011 |
|--|---|
| • • • • | (date of adoption - required) |
| Effective date if applicable: | 1 |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. |
| The amendment(s) was/we must be separately provide | ere approved by the shareholders through voting groups. The following statement ed 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) |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder |
| Dated_NO | vember 1, 2011 |
| Signature | hoar Mari |
| (B ₂ | y a director president or other officer – if directors or officers have not been |
| | ected, by antincorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | Joan Mann |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |