# P10 0000 5448L

(Req	uestor's Name)	
(Addı	ress)	
(Adda	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



100353160811

01/06/21--01023--029 \*\*10.00

10/05/20--01009--019 \*\*25.00

Hincod

JAN 07 2021 I ALBRITTON

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: RH COA	RPORATION	
	1: P1000005		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.	
Please return all correspo	ndence concerning this mat	iter to the following:	
_	JUD	iTH ARON Name of Contact Per	) SON
			PRATE SERVICES LLC
		OTON CT.	
		Address	
	WESTON	J	27
		City/ State and Zip C	°ode
For further information co	E-mail address: (to be us meerning this matter, pleas		port notification)
JUDITH Name of C	ARONSON Contact Person	at ( <u>952</u> Area	Code & Daytime Telephone Number
Enclosed is a check for th	e following amount made p	payable to the Florida D	Department of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	© \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. Bo	z Address ment Section n of Corporations ox 6327 ssee, FL 32314	Am Div The 241	eet Address endment Section ision of Corporations : Centre of Tallahassee 5 N. Monroe Street, Suite 810 lahassee, F1, 32303



22.20

## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2020

JUDITH ARONSON 1153 CROTON ST WESTON, FL 33327

SUBJECT: RH CORPORATION Ref. Number: P10000054486

We have received your document for RH CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 520A00023894



200 - 200

### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2020

JUDITH ARONSON 1153 CROTON ST WESTON, FL 33327

SUBJECT: RH CORPORATION Ref. Number: P10000054486

We have received your document for RH CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 120A00022791

www.sunbiz.org

L' DO DOM GOOR MILL

#### Articles of Amendment to Articles of Incorporation

of

RH CORPORATION
(Name of Corporation as currently filed with the Florida Dept. of State)
P10000054486
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A"
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
<del></del>
· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BON)
 ح
—
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent US Latarn Corporate Services LLC
1110 Brickell Ave suite 430
(Florida street address)
New Registered Office Address: Mi AMi Florida 33131
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent—I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Check if applicable  ☐ 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)

Example:

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	<u>v</u>	Mike Jones	
X Add	$\underline{SV}$	Sally Smith	•
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u> </u>		
Add			
Remove			
2) Change		<u></u>	
Add			
Remove 3 ) Change	<del> </del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		; ;	
Remove			
6) Change	<del></del>		
Add	/		
Remove			

•		•	
amending or adding additional Articles, enter change(	(c) here:		
Mach additional sheets, if necessary). (Be specific)	(S) HETE.		
			-
		JAN .	
		*	
The second secon	<del> </del>		
	,		
	<del></del>	<del>.</del>	<del> </del>
	<i>,</i>		
			_
,*			
	<del></del>	<del></del>	
			•
M-24			
· · · · · · · · · · · · · · · · · · ·			
,			
If an amendment provides for an exchange, reclassificati provisions for implementing the amendment if not contains.	ion, or cancellation o	f issued shares,	
(if not applicable, indicate N/A)	amed in the amendi	tent itseit:	
.,			
	<u> </u>		
<del>/</del> -			<del></del>
,	-	-	
			,
			_
·			

		· •
The date of each amendment(s) adoption:late this document was signed.	11/23/2020	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	(e)
ocument's effective date on the Department of S	it meet the applicable statutory filing requireme State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) ( <u>CIII</u>	ECK ONE)	
The amendment(s) was/were adopted by the in action was not required.	ncorporators, or board of directors without share	holder action and shareholder .
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the approval.	mendment(s)
The amendment(s) was/were approved by the must be suparately provided for each voting g	shareholders through voting groups. The follow group entitled to vote separately on the amendme	ing statement ent(s).
	dment(s) was/were sufficient for approval	
by	ng group)	
(votin	ng group)	
selected, by an incorpanied fiduciary b	ent or other officer – if directors or officers have porator – if in the hands of a receiver, trustee, or by that fiduciary)  A ROSSATO	not been other court
(T	yped or printed name of person signing)	
	$\frac{-\int \mathcal{R} \in S_i D \in \mathcal{N} \top .  S \in \mathcal{C}_{\mathcal{K}} \mathcal{T} \mathcal{T}}{\text{itle of person signing)}}$	412 Y
(T	itte of person signing)	/

•