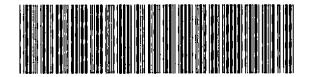
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COVER LETTER

'O: Amendment Section

Division of Corporations

NAME OF CORPORATION: _ _ RUSSIAN MIAMI SERVICE, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TAMARA TRETYAKOVA Name of Contact Person RUSSIAN MIAMI SERVICE :Firm/ Company 1001 N FEDERAL HWY SUITE 359 Address HALLANDALE BEACH FL 33009 City/ State and Zip Code RUSSIANMIAMISERVICE@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TAMARA TRETYAKOVA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

RUSSIAN MIAMI SERVICE, INC.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P11000077678	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1001 N FEDERAL HWY SUITE 359
(Principal office address MUST BE A STREET ADDRESS)	HALLANDALE BEACH FL 33009
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
(Florida si	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and ddress 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: > = 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 1 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 PΤ John Doe X Remove \underline{V} Mike Jones <u>\$V</u> Sally Smith X Add Address 5 Title Name Type of Action (Check One) 1001 N FEDERAL HWY SUITE 3: **PST** JULIAN TRETYAKOV 1) ____ Change HALLANDALE BEACH FL 3300° Add Remove 1001 N FEDERAL HWY SUITE 3: TAMARA TRETYAKOVA **PST** Change HALLANDALE BEACH FL 33001 Remove Change __ Add __ Remove 4) ____ Change

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:			
(Attach additional sheets, if necessary).	(Be specific)		

Add

5) ____ Change

6) ____ Change

Add

Remove

___ Add

__ Remove

Remove

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provisions for implementing the amendment i (if not applicable, indicate N/A)	I not contained in the amendment risen.	
	,	
	4	
	Page 3 of 4	
	Page 3 of 4	
The date of each amendment(s) adoption:		if other than the
date this document was signed. DECEMBER 16, 201	Page 3 of 4 MBER 12/12/2019	if other than the
date this document was signed. DECEMBER 16, 201 Effective date if applicable:	Page 3 of 4 MBER 12/12/2019	if other than the

lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ocument's effective date on the Department of State's records. 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 ☐ 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. Dated 12/12/2019 Signature (By a director, 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 fiduciary by that fiduciary) TAMAR'A TRETYAKOVA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)