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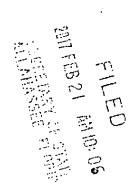
(Requestor's Name)		
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PICK-UP WAIT MAIL		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	RGA SERVICES, INC.				
DOCUMENT NUMBER:	P12000035722				
The enclosed Articles of Amendment and fo	ee are submitted for filing.				
Please return all correspondence concerning	this matter to the following:				
	EVELYN R. YOUNG				
	Name of Contact Person				
	KEY YOUNG ASSOCIATES, INC.				
	Firm/ Company				
	3561 NW 109TH TER				
	Address				
SUNRISE FL 33351					
 	City/ State and Zip Code				
	keyyoungassociates@yahopo.com				
E-mail address:	(to be used for future annual report notification)				
ì					
For further information concerning this matt	er, please call:				
EVELYN R. YOUNG	at (954) 822-6878				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amour	nt made payable to the Florida Department of State:				
\$35 Filing Fcc \$43.75 Filing Certificate of \$					
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 to Articles of Incorporation of

RGA SERVICES INC

	RGA SERVICES, INC.
(Name of Corporation	on as currently filed with the Florida Dept. of State)
	RGA SERVIICES, INC.
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
(Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or register new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
Nov. Bonintonad (200 an Address)	
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signa	ature 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 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> <u>J</u>	ohn Doc		
X Remove	<u>v</u> <u>n</u>	Mike Jones		
X Add	<u>sv</u> <u>s</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	ST	JIMENEZ, SILVIA	12518 SW 7TH STREET	
Add			DAVIE, FL. 33325	
X Remove				
2) Change				
Add			<u></u>	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove		·		
5) Change				
Add				
Remove			.	
6) Change				
Add				
Pernove				

•	cles, enter change(s) here: (Be specific)	
	 	
 		
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 day	s after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The num by the shareholders was/were sufficient for approval.	ber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote s	
"The number of votes cast for the amendment(s) was/were suf-	ficient for approval
byGABRIEL, ROMERO-FORES	, ,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without s action was not required.	hareholder action and shareholder
02/14/2017	
Dated	-
(By a director, president or other officer - selected, by an incorporator - if in the han appointed fiduciary by that fiduciary)	
GABRIEL, ROMERO	-FLORES
(Typed or printed name	of person signing)
PRESDEN"	r
(Title of per	son signing)