P120000 49033

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	IN: RPA	Consultin	g Inc	
DOCUMENT NUMBER:	Pia	00004903	<u>3</u>	
The enclosed Articles of An	rendment and fee are sul	omitted for filing.		
Please return all corresponde	rnce concerning this mat	ter to the following:		
<u></u>	Patercia	A Pollari Name of Contact Person	1	
Firm/ Company				
	7274 NW 63 Way			
	Park	Address	33067	
	Tury	City/ State and Zip Code		
 -	PATEIC -mail address, (to be use	(A \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	modification made Com	
For further information conc	erning this matter, pleas	e call:		
Fatricia Name of Con	Pollari		a 55 38 48 de & Daytime Telephone Number	
Enclosed is a check for the f	ollowing amount made p	payable to the Florida Depa	ortment of State;	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mailing A</u> Amendme			Address mem Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Ft. 32303

Articles of Amendment 10

Articles of Incorporation

of

RPA Consulting Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
Platoco 49033	
(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) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
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)	* 4
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, it applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the	3 PH 2: 34
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
ri lorida street address)	
New Registered Office Address:	
(City) (Zip Code)	
New Registered Agent's Signature, it changing Registered Agent: Thereby accept the appointment as registered agent—I am tamiliar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	
Check if applicable	

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)

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	PT John	ı Doe		
X Remove	y Miķ	e polici		
<u>X</u> Add	<u>SV</u> <u>S</u> all	y Sm <u>it</u> h		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change				
Add				
Remove 2) Change	VP	PATELCIA Pollari	12534Wiles Rd Coral Springs FL 3	307k
Add Remove Change Add	<u></u>	Robert Pollari	17534 Wiles Rd COMI Springs Fil 33016	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			<u> </u>	
Remove				
6) Change			· 	
Add				
Remove			····	

	, if necessary) — (Be spec	qu f		
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n amendment provi	des for an exchange, rec enting the amendment if	lassification, or can	cellation of issued	hares,
(if not applicable, i	ndicate NO()	i noi contained in ti	ie amenument user	<u>L.</u>
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The date of each amendment(s) adoption: date this document was signed	7/29/2026	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing (equirements, this date wi	ll not be listed as the
Adoption of Amendment(s) (C)	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareholder action an	d shareholder
 The amendment(s) was were adopted by the by the shareholders was/were sufficient for 	e shareholders. The number of votes east for the amendment(s) rapproval.	
	he shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amo	endment(s) was were sufficient for approval	
by	ding group)	
Dated 7/29/20	20	
selected, by an inc	sident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court ry by that fiduciary)	_
	Tatzicia Pollati (Typed or printed name of person signing)	
	(Fitle of person signing)	
	A cone on her was significant	

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