P12000059213

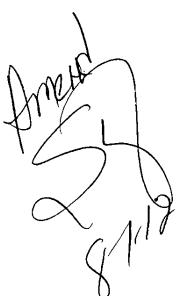
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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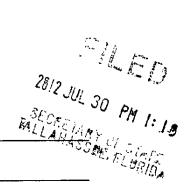


COVER LETTER

TO: Amendment Section

Division of Corp	orations			
NAME OF CORPO	RATE OF I	ROLL, CORP		
DOCUMENT NUM	BER: P1200005921	3		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	ROCIO DUARTE			
		Name of Contact Person	١	
	RATE OF ROLL,			
	5005 NN4 400 OT	Firm/ Company		
	5325 NW 189 ST			
	MIANALEL COOEE	Address		
	MIAMI FL 33055	C'(0		
		City/ State and Zip Code		
BU	SINESSACCTPR			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
ROCIO DUA	RTE	at (305	733-9055	
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	lling Address		Address	
	endment Section ision of Corporations		ment Section n of Corporations	
P.O.	Building			
Tall	ahassee, FL 32314	**	xecutive Center Circle issee, FL 32301	

Articles of Amendment **Articles of Incorporation** of



RATE OF ROLL, CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000059213

ent(s) to

(Document Numbe	er of Corporation (if ki	nown)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Fla	orida Profit Corporat	ion adopts the following amo	endm
A. If amending name, enter the new name of th	e corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co	". A professional co	corporated" or the abbrev	nev viation iin the
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(BOX)			
D. If amending the registered agent and/or registered agent and/or the new register	istered office address red office address:	in Florida, enter th	e name of the	
Name of New Registered Agent			··········	
	(Florida street	address)		
New Registered Office Address:	(City)	, F	orida (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: nt. I am familiar witi	h and accept the obliq	gations of the position.	
Signature o	of New Registered Age	ent, if changing		

(Attach additional sheets Please note the officer/di P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted	if neces rector til Presiden = Chief r, Direct in the fo wes the c	orector i sary) le by the , t; T= Tre Financial or would ollowing n corporatio	neing added: first letter of the office title: easurer; S= Secretary; D= Director; S Officer. If an officer/director holds be PTD. nanner. Currently John Doe is listed on, Sally Smith is named the V and S. S	fflcer/director being removed and title, name, and TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change.
X Change	<u>PT</u>	John D	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) X Change	Р		ROCIO DUARTE	5325 NW 189 STRET
Add		_		MIAMI FL 33055
Remove				
2) Change		_		
Add				
Remove				AND A STATE OF THE
3) Change		-		
Add				
Remove				
4) Change				
, Add		 -		
Remove				
<u> </u>				
5) Change		_		
Add	•			
Remove				
6) Change		_		

____ Add

____ Remove

	or adding addition onal sheets, if neces:	sary). (Be sp <mark>eci</mark>	fic)		
					
···					
					
			74 		
				-	
_					
<u>rovis</u> lons fa	nent provides for an or implementing the	<u>e amendment if n</u>	ssification, or ca of contained in t	<u>he amendment</u>	ued snares. itself:
(if not ap	pplicable, indicate N	∀A)			
				·····	
					
			·		
A.					

The date of each amendment	(s) adoption: JULY 7, 2012
Effective date if applicable:	JULY 7, 2012
	(no more than 90 days after umendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
• •	e approved by the shareholders through voting groups. The following statement d 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)
	(voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a was not required.	e adopted by the incorporators without shareholder action and shareholder
IUL	Y 9, 2012
Signature	16
(By	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	ROCIO DUARTE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)