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COVER LETTER

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: K Developement, MC. DOCUMENT NUMBER: P13000035637			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
1 Rina S Kryslopik Name of Contact Person			
200 2nd Ave S. Sta 127			
200 2 hd flue S. Sta 127 St. Petersbyrg Fe 33701 City/State and Zip Code			
ISK Shinds by closing Hol. Com E-mail address: (to be used for future innual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (727), 388 7064 Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Street Address Amendment Section			

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation

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R Developement, mc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P130000 35637	
(Document Number of Corporation (if known)	

dment(s) to

Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation: A. If amending name, enter the new name of the	e corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp," "Inc," or "Co".	company," or "incorpo A professional corpor	orated" or the abb	
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) D. If amending the registered agent and/or reg	 istered office address in	Florida, enter the nai	me of the	13 OCT 18 M.
new registered agent and/or the new registe	red office address:			
Name of New Registered Agent			_	4
	(Florida street add	dress)	-	5
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		nd accept the obligation	ns of the position.	
Signature o	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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
, Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	- <u>-</u> -
	
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If an amendment provides for an eyeb	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amor	adment if not contained in the amondment itself.
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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	
by" (voting group)	
(voting group)	
☐ 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	
Skry cto for	
(By a director, president or 6ther 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)	
Pina S. Krystofik_ (Typed or printed name of person signing)	
VISE PRESIDENT (Title of person signing)	
/ (Title of person signing)	