P13000040402

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	D4200040	NT CREATIONS 1402	GROUP, INC.
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	GARY D. ALE	EXANDER	
-	THE RADIAN	Name of Contact Person	IS GROUP, INC.
-	1313 S. KILLI	Firm/ Company AN DRIVE, S	UITE B
	LAKE PARK,	FL 33403	
		City/ State and Zip Code	•
G.A	Alexander@Ra E-mail address: (to be us	diantCreations sed for future annual report	
For further information	concerning this matter, pleas	e call:	
	EXANDER	at (772	380-4320
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 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)

Mailing Address

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

THE RADIANT CREATIONS GROUP, INC.

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

P13000040402				
(Documer	nt Number of Corporation (if I	known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation a	dopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:			<i>-</i>
name must he distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpor	orated" or the abl	breviation ontain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		1313 S. KILLIAN DRIVE	E, SUITE B	F: C3
		LAKE PARK, FL	I DRIVE, SUITE B K, FL 33403 The name of the	
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>			77 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	
D. If amending the registered agent an	d/or registered office addre	ss in Florida, enter the nar	me of the	
new registered agent and/or the new				
Name of New Registered Agent	GARY R. SMITH		-	
	1313 S. KILLIAN I	•	_	
New Registered Office Address:	(Florida stree		33403	
	(City)		(Zip Code)	
New Registered Agent's Signature, if cl I herehy accept the appointment as registe	ered agent. I am familiar wii		s of the position.	
Sig	gnature of New Registered Ag	ent, 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	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	STD	GARY D. ALEXANDER	1313 S. KILLIAN DRIVE, SUITE B
Add			LAKE PARK, FL 33403
Remove			
2) X Change	PD	GARY R. SMITH	1313 S. KILLIAN DRIVE, SUITE B
Add			LAKE PARK, FL 33403
Remove			
3) X Change	D	MANPREET SINGH	1313 S. KILLIAN DRIVE, SUITE B
Add			LAKE PARK, FL 33403
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove		·	
6) Change			
Add			
Remove			

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n amendment pro covisions for imple (if not applicable	menting the amer	ange, reclassifica adment if not co	ation, or cancell ntained in the ai	ation of issued shar nendment itself:	ces,
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09/27/2013 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 (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. 09/27/13 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 addiciary by that fiduciary) GARY D. ALEXANDER (Typed or printed name of person signing)

CORPORATE SECRETARY

(Title of person signing)