P13000069621

(Requestor's Name)
(Address)
·
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Chairman Sakhallaran)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
P
Special Instructions to Filing Officer:

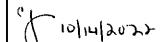
Office Use Only



100390755841

07/12/22--01011--004 **35.00

85.4 ... 15 L. #:38



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RADA DISTRIBUTORS CORP	
DOCUMENT NUMBER: P13000069621	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RAFAEL FOSSI	
Name of Contact Person	
RADA DISTRIBUTORS CORP	
Firm/ Company	
24522 VOLTA GARDEN CT	
Address	
KATY, TX 77493	
City/ State and Zip Code	
RAFAELFOSSI@HOTMAIL.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
ADRIAN MORLANNE at (786) 360-3004	
Name of Contact Person Area Code & Daytime Telephone	e Number
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, SuiteTallahassee, FL 32303	e 810

Articles of Amendment to Articles of Incorporation of

RADA DISTRUBUTORS INC	12 501.0
(Name of Corporation	as currently filed with the Florida Dept. of State)
P13000069621	
(Docume	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	eatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	oration:
	The new
	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word with the word."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD R</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(Sig)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. It	ered Agent: m familiar with and accept the obligations of the position.
Signati	re of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	RICARDO B FOSSI	15902 HIGHWAY 3 1022
Add			HOUTN, TX 77598
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	adding additional Ar al sheets, if necessary).	(Be specific)				
			<u>.</u>			
	-	-				
						
			, , -			
						
an amendme	nt provides for an exc	hange, reclassifi	cation, or cancel	lation of issued s	hares,	
provisions for	implementing the am	endment if not c	ontained in the a	mendment itself	<u>:</u>	
(ij not uppi	icable, indicate N/A)					
						_
				_		
						_

·	07/07/2022		
The date of each amendment(s) adopt	tion:		, if other than the
date this document was signed.			
07/07/20 Effective date if applicable:)22		
Effective date it applicable.	(no more than 90	days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Depart		able statutory filing requirements, this c	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were adopted action was not required.	I by the incorporators, or b	oard of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		number of votes cast for the amendmen	t(s)
		ugh voting groups. The following states of the separately on the amendment(s):	nent
"The number of votes cast for t	he amendment(s) was/wer	e sufficient for approval	
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)		
selected, by		er – if directors or officers have not been hands of a receiver, trustee, or other cou	
RAI	FAEL FOSSI PAFAE	1 +6551	
	(Typed or printed n	ame of person signing)	
PRE	ESIDENT (b _	
	(Title of person sign	ping)	