P140000000

(Re	equestor's Name)
(A	ddress)
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SECRETARY OF STATE SECRETARY OF STATE O

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: RECCURCES 1 IN	KC	
	P14000066603		
The enclosed Articles of An	nendment and fee are su	bmitted for filing.	
Please return all correspond	ence concerning this ma	tter to the following:	
NAG	Y LAJOS		
		Name of Contact Person	1
		Firm/ Company	
РО В	OX 1386		
DAY	TONA BEACH, FL 32	Address	
	101111111111111111111111111111111111111	City/ State and Zip Code	2
	E-mail address: (to be us	sed for future annual report	notification)
For further information cond	cerning this matter, pleas	se call:	
NAGY LAJOS		at (<u>407</u>	725-1816
Name of Cor	ntact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
S35 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)
Division o P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

RECCURCES 1 INC (Name of Corporation as currently filed with the Florida Dept. of State) P14000066603 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation 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) C. Enter new mailing address, if 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 new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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= Treusurer; 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, Treusurer, 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	P	ZOLTAN SZODI	36A CYPRESS CIR
Add			ORMOND BEACH, FL 32176
X Remove			
2) Change			
Add			
X Remove			
3) Change	VP	LAURA RUDO	36A CYPRESS CIR
Add			ORMOND BEACH, FL 32176
Remove			
4) Change	P	NAGY LAJOS	PO BOX 1386
XAdd			DAYTONA BEACH, FL 32115
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
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f an amendment provides for an exch	ange, reclassification	on, or cancellation	of issued shares,	
provisions for implementing the ama	nument ii not conta	med in the amenda	nent itseit:	
provisions for implementing the ame (if not applicable, indicate N/A)				
provisions for implementing the ame				
provisions for implementing the ame				. .
provisions for implementing the ame				
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provisions for implementing the ame				
provisions for implementing the ame				

10/10/2	2017	
The date of each amendment(s) adoption:date this document was signed.		, if other than the
10/10/2017		
Effective date if applicable:	o more than 90 days after amendment file date)	
(111	o more man 90 days after amenament fae date)	
Note: If the date inserted in this block does not medocument's effective date on the Department of State	neet the applicable statutory filing requirements, this date will nee's records.	ot be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
■ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	reholders. The number of votes cast for the amendment(s) oval.	
	areholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendme		
by(voting :		
(voting g	group)	
☐ The amendment(s) was/were adopted by the boar action was not required.	rd of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the inco action was not required.	orporators without shareholder action and shareholder	
10/10/2017 Dated		
Signature None	Lajos	
(By a director, president	t or other officer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court that tiduciary)	•
NAGY LAJOS		
(Тур	ped or printed name of person signing)	
PRESIDENT		
<u></u> _	(Title of person signing)	