## P150000121100

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AMINA MANUAL

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	RATION: R.B.Y. FLORIDA	COMPANY				
DOCUMENT NUM	BER: P15000072160					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	RUBEN D. TORO					
		Name of Contact Persor	1			
	RUBEN TORO P.A.					
		Firm/ Company				
	7901 KINGSPOINTE PKW	Y STE. 31				
	Address					
	ORLANDO FL 32819					
		City/ State and Zip Code	e .			
rubo	encpa@bellsouth.net					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
Ruben D. Toro		at ( <sup>407</sup>	370-6445			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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)			
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle			

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of

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R.B.Y. FLORIDA COMPANY		
(Name o	f Corporation as currently filed	with the Florida Dept. of State)
P15000072160		
	(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida</i>	a Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	me of the corporation:	
J&RB FLORIDA COMPANY		The new
	ation "Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address,		•
(Principal office address MUST BE A S	TREET ADDRESS)	
C. Enter new mailing address, if applications address MAY BE A POST		2018 OCT -E SECRETAR TALLAHAS
D. If amending the registered agent ar		
new registered agent and/or the new Name of New Registered Agent	YERAHMIEL SHARABI	PH 2:
	5511 GLASGOW AVE.	TE T
	(Florida street addr	ress)
New Registered Office Address:	ORLANDO	32819 Florida
The state of the s	(City)	(Zip Code)
New Registered Agent's Signature, if continued the street in the suppointment as regis		nd accept the obligations of the position.

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
I) Change	DPST	ROONY BAR LEV	5511 GLASGOW AVE.
Add			ORLANDO FL 32819
X Remove	:		
2)Change	DPST	YERAHMIEL SHARABI	5511 GLASGOW AVE.
X Add			ORLANDO FL 32819
Remove	1		
3)Change	. —		
Add _	;		
Remove	;		
4) Change	:		
Add			
Remove			
5) Change			
Add ·		,	
Remove			
:	•		
6) Change	·		
Add	:		
Remove	:		

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classification If not contain	n, or cancella	ation of issue nendment its	d shares, elf:	
		·		
	<del> </del>	,		
			<u> </u>	
<del>,</del>				
	classification f not contain	classification, or cancell	classification, or cancellation of issue	classification, or cancellation of issued shares, f not contained in the amendment itself:

09/22/2015	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
date this viocument was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file dat	'e)
Note: If the date inserted in this block does not meet the applicable statutory filing requireme document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arby the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	l shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	reholder
09/22/2015 Dated	
Signature Rooms Ber Lev	<del></del>
(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 courappointed fiduciary by that fiduciary)	ırt .
Roony Bar Lev	
(Typed or printed name of person signing)	
President	
(Title of person signing)	