P/6000004133

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ES RELIABLE IN	VESTMENT INC		
DOCUMENT NUMB	ER: P16000004133			
	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
5	SERGEY SLASTIKHIN			
_		Name of Contact Person	1	
I	ES RELIABLE INVESTME	NT INC		
_		Firm/ Company		
1	17070 COLLINS AVE STE	260		
_		Address		
5	SUNNY ISLES BEACH FL	33160		
-		City/ State and Zip Code	e	
SALA	TSV@GMAIL.COM			
	•	sed for future annual report	notification)	
	,	•	·	
For further information	concerning this matter, pleas	se call:		
SERGEY SLASTIKHI	N	at (202-7766	
Name o	f Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	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)	
Mailing Address Amendment Section		Street Address Amendment Section		
	tion of Corporations Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FS RFI	JARI	FIN	ፓፑርፕዪ	/FNT	INC

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P16000004133	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
(a rincipal office address <u>(NOST BL A STREET ADD</u>	P 10
	P P P P P P P P P P P P P P P P P P P
0.00	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	X)
-	
	<u> </u>
D. If amending the registered agent and/or register	ed 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) (Zip Code)
New Registered Agent's Signature, if changing Regi	ictored Agent
	I am familiar with and accept the obligations of the position.
C'	ature 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 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	VP	EVGENIY GARBOVSKIY	17070 COLLINS AVE STE 260
Add			SUNNY ISLES BEACH FL 33160
X Remove			
2) Change	P	SERGEY SLASTIKHIN	17070 COLLINS AVE STE 260
X Add			SUNNY ISLES BEACH FL 33160
Remove 3) Change	GM	SVETLANA YAROVENKO	17070 COLLINS AVE STE 260
X Add			SUNNY ISLES BEACH FL 33160
Remove			
4) Change			
Add Remove			
			•
5) Change			
Add			
Remove			****
6) Change			
Add			
Remove			

amending or adding ttach additional sheet	s, if necessary).	(Be specific)				
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		- + -				
					<u>-</u> -	
						-
	,					
an amendment prov provisions for implen (if not applicable,	nenting the amend	ige, reclassifica	ition, or cancell itained in the ar	ation of issued : mendment itself	shares.	

	04/12/2016	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	1/10/0017	
Effective date if applicable:	1/12/2016	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	ent(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	r
04/12/20 Dated	16	
Signature		
	director, president or other officer - if directors or officers have not be	
	sted, by an incorporator - if in the hands of a receiver, trustee, or other of	court
арро	inted fiduciary by that fiduciary)	
	SERGEY SLASTIKHIN	
	(Typed or printed name of person signing)	
	PRESIDENT	•
	(Title of names signing)	