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JAN **26** 0000 T. LEVATUK

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RED SERVICES I	NC				
DOCUMENT NUMBER: P16000051833					
The enclosed Articles of Amendment and fee are sul	bmitted for filing.				
Please return all correspondence concerning this mat	ster to the following:				
HIRAN MENDEZ					
1	Name of Contact Person				
Firm/ Company					
MANW LOCALI CA	Address				
410 NW 106TH ST	City/ State and Zip Code				
MIAMI, FL 33150	,				
E-mail address: (to be us	ed for future annual report notification)				
For further information concerning this matter, pleas	e call:				
HIRAN MENDEZ	at (786) 458-3839 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made p	payable to the Florida Department of State:				
S35 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee 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

of

	of	F
RED SERVICES INC		FILE
(Name of Corpora	tion as currently filed with the Florida I	Dept. of State)
P16000051833		2019 JAN 24 P 12: 31
(Docu	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this Florida Profit Corporatio	n adopts the following amendment(s)
A. If amending name, enter the new name of the	corporation:	
ELECTRIC DOMAIN INC		The new
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or th	rp," "Inc," or "Co". A professional corp	orporated" or the abbreviation poration name must contain the
B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET AL</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u> D. If amending the registered agent and/or regist		name of the
new registered agent and/or the new registere		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		tions of the position.
Sis	gnature of New Registered Agent, if changi	ing

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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

 If amending or adding additional Arti (Attach additional sheets, if necessary). 	(Be specific)
AMENDING NAME	
 	
,	
	
mark and the second of the sec	annual and the state of the sta
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
_	

The date of each amendmen		, if other than the
date this document was signed	u. - 01-17-2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	fill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
01-17 Dated Signature_2	7-2019	
~ (i	By a director, p esident other officer - if directors or officers have not been	
	elected, by an inexporate – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that Ilduciary)	
	HIRAN MENDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	