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SECRETARY OF STATE.
SALLAHASSEE, FLORID.

NOV 17 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: _____RHONDA FL, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Daniel A. Kaskel, Esq. Name of Contact Person Sachs Sax Caplan, P.L. Firm/ Company 6111 Broken Sound Parkway NW, Suite 200 Address Boca Raton, Florida 33487 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Daniel A. Kaskel, Esq. Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

and the second of the second o	RHONDA FL, INC.			
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new man 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) N/A 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: (City) (City) New Registered Agent's Signature, if changing Registered Agent:	(Name of Corporation	as currently filed with the Florida Dept. o	of State)	
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			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 = 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	Y	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	P	Ronen Saban	6111 Broken Sound Pkwy NW
Add			Suite 200
x Remove			Boca Raton, FL 33487
2) Change	D	CS Directors Limited	Charter Place
$\frac{X}{X}$ Add			23-27 Seaton Place, St. Helier
Remove			JE1 1JY, Jersey
3) Change	Α	Daniel A. Kaskel, Authorized Agent	6111 Broken Sound Pkwy NW
X Add			Suite 200
Remove			Boca Raton, FL 33487
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

/ 4	(Be specific)		
/A			
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provisions for implementing the am	change, reclassification, or endment if not contained	cancellation of issued shain the amendment itself:	res,
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The date of each amendment	t(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	November 14, 2016	
Encerve date <u>it applicable</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	will 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	
Nove Dated	mber 14, 2016	
Dated		
Signature _	Day Ain	
	By a director, president or other officer – if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	
	Daniel A. Kaskel	
	(Typed or printed name of person signing)	
	Authorized Agent	
	(Title of person signing)	