## P16000091806

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: RICMAXNIC 19	982, INC.			
DOCUMENT NU	MBER: P16000091806				
	es of Amendment and fee are s	submitted for filing.			
Please return all cor	respondence concerning this m	natter to the following:			
	Alejandra Ramirez				
		Name of Contact Perso	n		
	Rogers, Morris & Ziegler L	LP			
	Firm/ Company				
	1401 East Broward Blvd. V	ictoria Park Centre, Suite 3	00		
		Address			
	Fort Lauderdale, FL, 33301				
		City/ State and Zip Coo	le		
arm	endoza@rmzlaw.com				
_	E-mail address: (to be u	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
Alejandra Ramirez		at (	462-1431		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	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)		
Ame Divi P.O.	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

RICMAXNIC 1982, INC.	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	<u>L</u>
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered." "professional association," or the abbreviatio	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2114 N. Flamingo Road # 1263,
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Pembroke Pines, FL 33028
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	2114 N. Flamingo Road # 1263,
	Pembroke Pines, FL 33028
D. If amending the registered agent and/or registered office ad 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)
ew Registered Agent's Signature, if changing Registered Ager hereby accept the appointment as registered agent. I am familian	nt: r 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 = 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: <u>X</u> 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)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	Officer	Marlene De Manzano	2114 N. Flamingo Road # 1263,
X Add			Pembroke Pines, FL 33028
Remove			
2) Change			·
Add			
Remove			•
3) Change	·		
Add			
Remove			
4) Change		·	
Add			·
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

(Atta	nending or adding additional A ch additional sheets, if necessar	y). (Be specific)	<del></del>		
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		- ·	<del></del>		<del>.</del>
provi	mendment provides for an excisions for implementing the amif not applicable, indicate N/A)	hange, reclassification endment if not contai	n, or cancellation of ned in the amendme	issued shares, nt itself:	
			<del></del> ,		·
		<del></del> . <u> </u>			
				·	

The date of each amendment(s) addate this document was signed.	doption:	, if other than th
Effective date if applicable:		•
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(fficient for approval.	s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statemers each voting group entitled to vote separately on the amendment(s):	e <b>nt</b>
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
☐ The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	भ
The amendment(s) was/were adopt action was not required.	eted by the incorporators without shareholder action and shareholder	
3/21/17 Dated Signature	2000	
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
A	Alejandra Ramírez	
_	(Typed or printed name of person signing)	
R	egistered Agent/Authorized Representative	•
_	(Title of person signing)	