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COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: RNFCORP3						
DOCUMENT NUMBER: <u>P1 700006 4471</u>						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
ROBYN FULLEY Name of Contact Person RNF (NP3) Firm Company PO BOX 4725						
Address Clear (2014) F. 33.75 8 City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Contact Person at (813) 586-3161 Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle						

Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

SECRETARY OF

(Name of Corporation as currently filed with the Florida Dept. of SGGG FLORID.)

RNFCOR

PINNOS 4471
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:
A. If amending name, enter the new pame of the corporation:
The new name 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)
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 RODY TUVET
1589 GCECNEA DC (Florida street address)
New Registered Office Address: CCW Water Florida 33755 (City) Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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: X Change	PT Io	<u>hn Doe</u>	
X Remove	<u>v</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	Illy Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	P	President	Robyn Fuller
Add			20 Bd 4725
Remove			Charboner 71 355
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change	***		· · · · · · · · · · · · · · · · · · ·
Add			
Remove			: :
6) Change			
Add			
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Attach additional sheets, if necessary).	(Be specific)		
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gate this document was signed.	600		14	2017	7	
Effective date <u>if applicable</u> :	-ep	(no more than 90	days after an	nendment file	e date)	
Note: If the date inserted in this document's effective date on the D	block does no epartment of S	it meet the applical State's records.	ble statutory	filing requir	ements, this date v	vill not be listed as th
Adoption of Amendment(s)	(<u>CH)</u>	ECK ONE)				
The amendment(s) was/were ad by the shareholders was/were s	lopted by the s ufficient for ap	hareholders. The n pproval.	number of vo	tes cast for t	he amendment(s)	
☐ The amendment(s) was/were ap must be separately provided fo	proved by the each voting	shareholders throu group entitled to vo	igh voting <u>e</u> r ote separatel	oups. The fo y on the ame	ollowing statement endment(s):	
"The number of votes cas	t for the amen	dment(s) was/were	sufficient fo	r approval		
by	-			·"		
, —	(voti	ing group)				
The amendment(s) was/were ac action was not required.	dopted by the t	board of directors v	without share	holder action	and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the i	incorporators witho	out sharehold	er action and	l shareholder	
Dated	9/14/	2017				
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Signature	THE WAY	126	- if directs	or officer	c have not been	
(By a	director, presi	ident or other office orporator – if in the	er — it urrecu	eceiver, trust	ee, or other court	
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