# 717000025379

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#### **COVER LETTER**

Division of Corporations				
NAME OF CORPORATION: Rhind Reporting, Inc.				
DOCUMENT NUMBER: 11/0000253 /9				
The enclosed Articles of Amendment and fee are submitted for filing.				
lease return all correspondence concerning this matter to the following:				
Rhino Reporting, INC. Firm/Company				
Rhino Reporting, INC.				
Firm/ Company				
9974 NW 6 Court  Address  Plantation FL 33324  City/ State and Zip Code				
Address				
Plantation FL 33324				
City/ State and Zip Code				
RI was parting @ amail. cam				
Rhinoce porting @ gmail. com E-mail address: (to be used-for future annual report notification)				
For further information concerning this matter, please call:				
Christopher Boyd at (954) 410-1942  Name of Contact Person 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)  \$35 Filing Fee Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

P170000	025379
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new name of the corporation	<u>ı:</u>
N/A	The ner
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	ration," "company," or "incorporated" or the abbreviatio or "Co". A professional corporation name must contain th
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
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 and registered agent and/or the new registered office add	
Name of New Registered Agent _ Chastophe	er Boud
9974 Nw (	, , , , , , , , , , , , , , , , , , , ,
New Registered Office Address: Plantation	
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am famil	gent: liar with and accept the obligations of the position.
Signature of Ne	ew 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 <math>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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	CED	<del></del>	Christopher Boyd	9974 NW 6 Court
_X_ Add				Plantation Fl 33324
Remove				
2) Change		-		
Add				
Remove				<del></del>
3) Change				<del></del>
Add				
Remove				
4) Change	·	<del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
<ul><li>δ) Change</li></ul>				
Add	*******	<del>-</del>	and the state of the second state of the second	,
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f an amendmen	t provides for an excl	iange, reclassific	ation, or cancella	tion of issued sha	res.
provisions for i (if not appl	mplementing the ame cable, indicate N/A)	ndment if not co	ntained in the an	<u>iendment itself:</u>	
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The date of each amendment(s) adoption:date this document was signed.	16 May 17	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this block does document's effective date on the Department of		requirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the amo	endment(s) was/were sufficient for approve	/al
by(ve	oting group)	—·"
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder a	ction and shareholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action	and shareholder
Dated 16 May 17 Signature By director pre	dent or other officer – if directors or off	ficers have not been
selected, by an inc	corporator – if in the hands of a receiver, by by that fiduciary)	trustee, or other court
Gue	(In K Boyd (Typed or printed name of person signing	g)
	President	
	(Title of person signing)	