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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

Email Address:____

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** : . .

COR AMND/RESTATE/CORRECT OR O/D RESIGN RHGI GIFTCO, INC.

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850-617-6381 3/24/2021 12:11:38 PM PAGE 1/001 Fax Server

March 24, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RHGI GIFTCO, INC. 1030 W CANTON AVE STE 100 WINTER PARK, FL 32789

SUBJECT: RHGI GIFTCO, INC.

REF: P17000049799

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Yasemin Y Sulker FAX Aud. #: H21000085352 Regulatory Specialist III Letter Number: 321A00006162 850-617-6381 3/3/2021 1:03:56 PM PAGE 1/001 Fax Server



March 3, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RHGI GIFTCO, INC. 1030 W CANTON AVE STE 100 WINTER PARK, FL 32789

SUBJECT: RHGI GIFTCO, INC.

REF: P17000049799

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker FAX Aud. #: E21000085352 Regulatory Specialist III Letter Number: 321A00004568 850-617-6381 3/22/2021 12:10:33 PM PAGE 1/001 Fax Server



March 22, 2021

CSC TRANS01

FLORIDA DEPARTMENT OF STATE

RUTH'S HOSPITALITY GROUP EMPLOYEE RELIEF FUND, INC. 1030 W CANTON AVE

WINTER PARK, FL 32789

SUBJECT: RUTH'S HOSPITALITY GROUP EMPLOYEE RELIEF FUND, INC.

REF: N05000010052

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker FAX Aud. #: H21000085350 Regulatory Specialist III Letter Number: 521A00005956

Articles of Amendment to Articles of Incorporation of

RHGI GIFTCO, INC.							
(Name of Corporation as cu	rrently filed	l with the Flo	rida Dept. of	State)	•		
P17000049799							
(Document Num	mber of Corp	oration (if kn	own)				
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florid</i>	la Profit Carp	oration adopt	s the foll	owing amo	andmer	nt(s) to
A. If amending name, enter the new name of the corporation	ion:						
	_ 				T'	neur	
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "	o". A prof	ny," or "inco Tessional corp	rporated" or t poration name	he abbre must-c	viation "C	огр., "	
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)						'	
(Studing datess SIAT DE ATOST OFFICE SOA)	_						
		, .					
						8	
D. If amending the registered agent and/or registered office	ce address it	ı Florida, ent	er the name c	f the			1
new registered agent and/or the new registered office ad	ddress:				11	70	2 · · ·
Name of New Registered Agent						ငှာ	A WELLS
					L.)	$\frac{3}{5}$	
(Flor	rida street ada	dress)					
New Registered Office Address:			. Ple	oriđa			
The state of the s	(City)				(Zip Code)		
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent:	ر بلاء مسال ما الرساد	aklimatinus at	`.f-aa:	tian.		
t nervoy accept the appointment as registered agent. I am jun	mintar aring ta	на иссері те	eonganons of	ine posi	iion,		
Signature of 1	New Registe	red Agent, if c	changing				

Check if applicable

[] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). F.S.

Example:

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; $\tilde{V} = Vice President$; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chalrman ar Clerk; CEO = ChiefExecutive 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 Bemove, and Sally Smith, SV as an Add.

X Change	<u>6.1</u> 7	ohn Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	SY S	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S/D	Marcy Lynch	1030 W Canton Ave., Ste 100
X Add			Winter Park, FL 32789
Remove			<u></u>
2) Change	T/D	Kristy Chipman	1030 W Canton Ave., Ste 100
X Add			Winter Park, FL 32789
Remove 3) Change	VP/D	Erik Jenkins	1030 W Canton Ave., Ste 100
x Add			Winter Park, FL 32789
Remove			
4) Change	EVP/D	Kristy Chipman	1030 W Canton Ave., Ste 100
Add			Winter Park, FL 32789
Remove			
5) Change	***************************************	·····	
Add			
Remove			
6) Change			<u></u>
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
(Attach additional slieets,	ij necessary). (Be sp	ecijic)			
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			***************************************		
		······			
If an amendment provi	des for an evekange re	eclassification or o	meellation of issued s	thares	
provisions for impleme	enting the amendment	if not contained in	the amendment itself	<u>:</u>	
(if not applicable, i	ndicate N/A)				
	<u> </u>				
	**************************************	<del></del>		<del></del>	
	····				
***************************************					

The date of each amendment(s) a date this document was signed.	idoption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad by the shurcholders was/were s	topted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group emitted to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	fyoting group)
	(voing group)
Dated	1/2/21
Signature	The July
(By a colected	lirector, president or other officer – if directors or officers have not been red, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Erik Jenkins
	(Typed or printed name of person signing)
	Vice President
	(Title of person cioning)