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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: RUT OUTFITTER	S OF LAKE MARY INC			
DOCUMENT NUM	P17000050475				
The enclosed Article	es of Amendment and fee are sul	bmitted for filing.			
Please return all cor	respondence concerning this mat	ter to the following:			
	DAVID CROWDER				
	Name of Contact Person				
		Firm/ Company			
	820 LAKE KATHRYN CR				
	Address CSSELBERRY, FL 32707				
		City/ State and Zip Cod	e		
RU	TOUTFITTERS@GMAIL.COM	4			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	e call;			
DAVID CROWDE	R _	at (<u>321</u>	276-5929		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check	for the following amount made p	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

RUT OUTFITTERS OF LAKE MARY INC

2019 APR -3 PH 12: 47

(Name of Corporation as current	ly filed with the Florida Dept. of State)
217000050475	11. U.
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
RELOADING TECHNOLOGIES INC	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc" or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	SAME
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME
(Mailing address MAT BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent N/A	
(Florida str	rint all de soli
(Farial SI	
New Registered Office Address: //	, Florida
	(Eity) (Zip Code)
iew Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Standard (Mark	Registered Agent, if changing
Signature of New R	registered Agent, ij endinging

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:	, unu sut		
X 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)	<u>Title</u>	Name	Address
1) Change		N/A	
Add			
Remove			
2) Change			
Add		, 1	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_ /	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
Λ
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

The date of each amendment(s) adoption:date this document was signed.	, if other than the
MARCH 19, 2019	
Effective date <u>if applicable</u> :	
(no more than 90 days i	afier amendment file date)
Note: If the date inserted in this block does not meet the applicable standard document's effective date on the Department of State's records.	ntutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vo must be separately provided for each voting group entitled to vote sep	
"The number of votes east for the amendment(s) was/were suffic	ient for approval
by	
(voting group)	
 The amendment(s) was/were adopted by the board of directors without action was not required. The amendment(s) was/were adopted by the incorporators without shat action was not required. 	
MARCH 29, 2019 Dated	
Signature	7
(By a director, president or other officer if selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
DAVID C CROWDER	
(Typed or printed name of	person signing)
PRESIDENT	
(Title of perso	n signing)