P17000066556

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TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: RT Production Ser	vices Inc.	
DOCUMENT NUMI	BER: P17000066556/EIN#:	82-2434846	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Ryan Roby		
		Name of Contact Person	
	RT Production Services Inc.		
		Firm/ Company	
	9110 Sabał Palm Circle		
		Address	
	Windermere, FL 34786		
		City/ State and Zip Code	
	ryanroby76@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Ryan Roby		at (543-8202
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 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 Dívisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, F1, 32303

Articles of Amendment to Articles of Incorporation of

	ot	
RT Production Services Inc.		
(Name of Corporation as curre	ntly filed with the Florida Dept.	of State)
P17000066556/EIN#: 82-2434846		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, the ts Articles of Incorporation:	ás Florida Profit Corporation add	opts the following amendment(s) t
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.,	A professional corporation na	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	英。 25
(Principal office address MUST BE A STREET ADDRESS)		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
		<u>京</u> 美工
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		2
		<u> </u>
). If amending the registered agent and/or registered office a	ddress in Florida, enter the nam	ie of the
new registered agent and/or the new registered office address	<u>ess:</u>	
Name of New Registered Agent N/A		
	street address)	
N/A		Physida
New Registered Office Address:	(City)	Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>	at the constitution
hereby accept the appointment as registered agent. I am familia	ir with and accept the obligations	of the position.
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: ir with and accept the obligations	of the position.

Signature of New Registered Agent, if changing

Check if applicable

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

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Stacia Thetard	9110 Sabal Palm Cir.
Add			Windermere, FL 34786
_X Remove			
2) Change			
Add			2022 HAY
Remove 3) Change			S 23 L
Add			<u> </u>
Remove			
4) Change	-		29
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
/A			
		<u>-</u>	-
			_
	- 1 22-	2022 HAY	
	<u> </u>	<u> </u>	
	<u>}</u>	7 2	
	823	끊	
	E.% ₩O	3	_
	## (7/ ##) ## \$#\$#:	կ։ 29	1
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		29	
provisions for implementing the amendment if not contained in the amendment itself:			
(if not applicable, indicate N/A) /A			
///			
			

date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after am	rendment file date)
Note: If the date inserted in this blod document's effective date on the Department.		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of director	ors without shareholder action and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of volcient for approval.	tes cast for the amendment(s)
	ved by the shareholders through voting gro th voting group entitled to vote separately	
"The number of votes cast fo	r the amendment(s) was/were sufficient for	r approval
by		
	(voting group)	FILED MIZHAY 23 PH L SECRETARY OF S FALLAHASSEE, FL
Dated MAY C	1,2022	PR F
Signature		<u> </u>
selected,	ctor, president or other officer – if director, by an incorporator – if in the hands of a rec fiduciary by that fiduciary)	
_	Ryan Roby (Typed or printed name of person	signing)
	Rec TOR	. 55m5/
	(Title of person signing)	