P170000 73952

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(Ad	dress)	
(Ad	ldress)	
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C Kinsey

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORAT	TON: RKN, INC.		
				-
		(mendment and fee are su		
Please return all co	orrespor	dence concerning this ma	tter to the following:	
	PR	ONOY PADDER		
			Name of Contact Persor	1
	RK	N. INC.		
			Firm Company	
	43	S CENTRAL AVENUE		
	_	· 	Address	
	LA	KELAND, FL 33815	. 14441 (-1).	
			City' State and Zip Code	e
þ	rotiman	ajumdara yahoo.com		
		E-mail address: (to be us	sed for luture annual report	notification)
For further inform	ation co	ncerning this matter, pleas	se call:	
PRONOY PADD	ER		at (<u>863</u>	500-1353
Na	ine of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for th	tollowing amount made	payable to the Florida Depa	urtment of State:
😇 \$35 Filing Fee	e.	☐\$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		Street	Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Fallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

οĹ

RKN, INC.			
(Name of Corporation as curren	atly filed with the Florida	Dept. of State)	
P17000073952			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006. Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporat	ion adopts the following amend	ment(s) t
A. If amending name, enter the new name of the corporation:			
N/A		The n	1,21,11
name must be distinguishable and contain the word "corporat "Corp.," "Inc." or Co.," or the designation "Corp.," "Inc." or word "chartered," "professional association" or the abbreviation	"Co" A projessional co	corporated" or the abbreviati	ion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	2019 (_
Transpar office and the second			
			Tents
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NeA	AH 8:	1 1 t
		35	-
D. If amending the registered agent and/or registered office ad	dress in Florida, enter th	e name of the	_
new registered agent and/or the new registered office addre	<u>(88):</u>		
Name of New Registered Agent		<u> </u>	
(Florida)	street address)		
New Registered Office Address:		, Florida	
	CHY	(Zip Code)	_
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent—I am familia	nt: r with and accept the oblig	ations of the position.	
Signature of New	Registered Agent, if chang	ting	

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 Emancial Officer | If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PID.

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: XChange	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>ce Jones</u>	
_X Add	SV <u>Sal</u> l	l <u>y Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>J</u> 8	PRONOY PADDER	3313 KILMER DRIVE
Add			LAKELAND, FL 33803
X Remove			
2) Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change	<u> </u>	- ·· - ···	
Add			
Remove			
51 Change			
Add			
Remove			
6)Change	······································		
Add			
Remove			

(Attach additional sheets, if necessary).	
F. If an amendment provides for an exchi	ange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the amen</u> (if not applicable, indicate N/A)	adment if not contained in the amendment itself:
N A	
	· ·

	10 08 2019	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
10/08	72019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east (or the amendment(s) was were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was were adoption was not required.	nted by the board of directors without shareholder action and shareholder	
The amendment(s) was were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
10/08/2019 Dated		
selected	Propay Padder vector, plesident or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court ad fiduciary by that fiduciary)	
	PRONOY PADDER	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	