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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Rockin Gear Inc.		
DOCUMENT NUME	BER: P17000086020		
	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	Abraham Franco		
		Name of Contact Person	1
	Rockin Gear Inc.		
		Firm/ Company	
	1600 NW 165th Street		
		Address	
	North Miami Beach, FL 331	69	
		City/ State and Zip Cod	e
abc@	miasouv.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Abraham Franco		at (305) <u>374-1169</u>)
Name o	of Contact Person	Area Code & Daytime Telephone Numb	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
S35 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		Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Rockingear Inc.			
(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)	
P17000086020			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new na	me of the corporation:		
Rockin Gear Inc.			The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mus. "P.A."	abbreviation
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
		 	
D. If amending the registered agent an	d/or registered office add	Iress in Florida, enter the name of the	
new registered agent and/or the new	w registered office addres	<u>is:</u>	A SO TH
Name of New Registered Agent	N/A	2	<u> </u>
	N/A		: <u> </u>
New Registered Office Address:	(Florida s	reei address)	o e o
	N/A	. Florida	្តី តែ
		(City) , Florida , E	FCode) (2)
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	erea agent 1 am Jamiliar	with and accept the obligations of the position.	
	Signature of New	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 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	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) N/A Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		
Add				
Remove				

N/A	
	 .
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)	
/A	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	1
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
11/13/20 Dated Signature	Indian du	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Abraham Franco	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	