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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BROWARD SOHO SERVICES INC.

Account Number : I20100000080 Phone : (954)366-3850 Fax Number

: (954)633-7850

\*\*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 **RULE SERVICE INC**

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MAY 0 4 2018

S. YOUNG

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## COVER LETTER

NAME OF CORPOR	AME OF CORPORATION: RULE SERVICE INC				
DOCUMENT NUMI	MBER: P18000028601				
The enclosed Articles	of Amendment and fee are	submitted for filing.			
	spondence concerning this m	-			
		RUTH FORERO			
	Name of Contact Person				
	RULE SERVICE INC				
•		Firm/ Company			
_	<b></b> .	1799 N STATE RD 7 STE 10			
	<u> </u>	Address			
<u>-</u>	MARGATE, FL 33063				
		City/ State and Zip Code			
		TAXRIGHT7@YAHOO.COM			
	E-mail address: (to be u	sed for future annual report notification)			
	concerning this matter, plca	054 517 9270			
Name of Contact Person		at (			
	the following amount made	payable to the Florida Department of State:			
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mulling 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			

To.

## Articles of Amendment to

	Articles o	f Incorporation				
	RULE	ERVICE INC				
(Nam	e of Corporation as cur	ently filed with the Flor	rida Dent of State)	<del></del>	<del></del>	
	P180	0028601	TO DEPT. OF STATE			
	(Document Numb	er of Corporation (if know	wn)			
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes,	this Florida Profit Corpo	ration adopts the fel	llowing :	amendi	ment(s) to
A. If amending name, enter the new		ł .				
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associ	ation," or the abbreviation	ation." "company," or r "Co". A professional m "P.A."	"incorporated" or i corporation name	The abbi	he ne reviatio itain th	rw on ie
B. Enter new principal office address (Principal office address MUST BE A.	if applicable: STREET ADDRESS )				16	
				<u> </u>	<del></del>	<del>4</del> 171
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> OFFICE BOX			\$ 1.7. Util	<del>ن</del> ن	
				177 ·		5
D. If amending the registered agent ar new registered agent and/or the ne	d/or registered office at	dress in Florida, enter 1	the name of the	27	_=	
	- registered office addr	iss: RODRIGUEZ				
Name of New Registered Agent		<u></u>				
	3580 WEST HILLSBO					
New Registered Office Address:	COCONUT CREEK	street address)	, Florida 3307	6		
		(City)		Zip Code,	,	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Ager	it:				
	Leor	7/4/		n.		
	Signature of New	Registered Agent, if chan	ging	_		

Fax: (954) 633-7850

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:

To.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	RUTH FORERO	3580 WEST HILLSBORO BLVD
Add			APT 102
X Remove			COCONUT CREEK, FL 33073
2) X Change	P	LEONOR RODRIGUEZ	3580 WEST HILLSBORO BLVD
Add			APT 102
Remove			COCONUT CREEK, FL 33073
3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

lf amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del> -	
an amendment provides for up over	
	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	estables in the amendment itself:
·	

From: Amelia Basso	Fax: (954) 833-7850	To.	Fax: (850) 617-6380	Page 6 of 6 05/03/2018 1.27 PM
The date o	if each amendment(s) adoption ocument was signed.	04/25/2018		if other than t
	ate <u>if applicable:</u>			
	: appreadit.	(no more tha	n 90 days after amendmet	at file date)
Note: If it document's	ne date inserted in this block do effective date on the Departmen	es not ment the an	eliante es es es	equirements, this date will not be listed as ti
Adoption o	of Amendment(s)	(CHECK ONE)		
☐ The ame by the s	endment(s) was/were adopted by hareholders was/were sufficient	the shareholders. T	The number of votes cast i	or the amondment(s)
☐ The amo	ndment(s) was/were approved by separately provided for each vo	y the shareholders ting group entitled	hrough voting groups. The to vote separately on the t	e following statement amendment(s):
··'T'	he number of votes cast for the a	mendment(s) was/v	vere sufficient for approva	ì
by		(voting group)		w
		(voting group)		-
☐ The ameraction wa	ndment(s) was/were adopted by a as not required.			ion and shareholder
The amer	ndment(s) was/were adopted by t is not required.	the incorporators wi	ithout shareholder action a	and shareholder
	04/24/2018 Dated			
	Signature Pull d	Juante fo	020	
	(By a director, pi	resident or other off	ficer - if directors or offic	ers have not been
	appointed fiduci	ary by that fiduciar	he hands of a receiver, tru  y)	stee, or other court
		RUTHF	ORERO	
		(Typed or printed	name of person signing)	
		PRESID	DENT	
		(Title	of person signing)	