## 018000030740

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SECRETARY OF STATE
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RED RETAI	L GROUP INC
DOCUMENT NUMBER: P18000030740	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
MIRIT ZELLER	
	Name of Contact Person
ORB CPA PA	
	Firm/ Company
6030 HOLLYWOOD I	BLVD STE 135
	Address
HOLLYWOOD, FL 33	024
<del></del>	City/ State and Zip Code
MIRIT@ORBCPA.COM	
	be used for future annual report notification)
For further information concerning this matter.  MIRIT ZELLER	
Name of Contact Person	at ( <u>786</u> ) <u>602-7840</u>
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Taliahassec, F1, 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

## RED RETAIL GROUP INC

(Name of Corporation as currently filed with the Florida Dept. of State) P18000030740	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	wing amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name m word "chartered," "professional association," or the abbreviation "P.A."	The new eabbreviation ust contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	14 Sept. 15
Name of New Registered Agent	
(Florida street address)	— 26 PH
New Registered Office Address:	(ip Code) 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positio	150 n.
Signature of New Registered Agent, it 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	DOR SADE	501 NE 5TH TER APT 324
Add			FORT LAUDERDALE, FL
X Remove			33304
2) Change	Р	RAMI SHAHMRAM	408 NE 6TH ST APT 618
Add			FORT LAUDERDALE, FL
X Remove			33304
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
	1	
an amendment provides for an excha-	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	numerical native Contained in the amendment fisch.	
		_
		_

The date of each amendment(s) :	07/20/2018	, if other than th
date this document was signed.	партом.	, it ones than t
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 E	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	te will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	s)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ac action was not required.	opted by the board of directors without shareholder action and shareholde	er -
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
07/20/20	18	
Dated		
Signature /		
(By a	director president or other officer - if directors or officers have not been	
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	τ
арұкл		
	EDEN SADE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	