## P180000 56046

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ROCK AND SCIS	SORS INC			
	IBER: p18000056046		_ <del>.</del>		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	JOHN MURPHY				
	Name of Contact Person				
	ACCURATE TAX AND ACCOUNTING				
	Firm/ Company				
	11799 SE US HWY 441				
	Address				
	BELLEVIEW FL 34420				
		City/ State and Zip Code	•		
ВЕІ	.LEVIEWTAX@YAHOO.COI	M			
	•	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
JOHN MURPHY		at ( <u>352</u>	307-0015		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check	for 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327 Tallabassee, FL 37314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

1₹ (	CK	AND	SC	ISSORS	CINC

(Name of Corporation as currently	filed with the Florida Dept. of State)
P18000056046	
(Document Number of the Company of t	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation.	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	****
	T T
C. Enter new mailing address, if applicable:	EB 2
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	in
	<u></u>
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Project and Asset	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar wa	ith and accent the obligations of the position
1 погеоу ассері іне арровители as registerea agent. Тат jamittar wi	ан ана ассері те отіданоть ој те рохиют.
Signature of New Re	gistered 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 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	P	SATWINDER TUCKER	12496 S US HWY 301	
Add			BELLEVIEW FL 34420	
X Remove				
2) Change	DIR	SATWINDER TUCKER	12496 S US HWY 301	
Add			BELLEVIEW FL 34420	
. X Remove				
3) Change	P	MEHARI II NEGASII	3001 SW 24TH AVE	
X Add			OCALA FL 34471	
Remove				
4) Change				
Add				
Remove				
5) Change		<del></del>		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach	ading or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
ે <u>lf an a</u> i	nendment provides for an exchange, reclassification, or cancellation of issued shares,
provis (i/	ions for implementing the amendment if not contained in the amendment itself:  not applicable, indicate N/A)
•	

,	02/14/2019	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	(0.1.2010	
01 	/01/2019	
milettive date is approxime.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	et(s)
	pproved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	ment
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	lder
action was not required.	dopted by the memperatures without shadelander detail and shadelander	
02/14/20 Dated	19	
Signature	Salide Ly	
selec	director, president or other officer – if directors or officers have not bee ted, by an incorporator – if in the hands of a receiver, trustee, or other co inted fiduciary by that fiduciary)	
	SATWINDER TUCKER	
	(Typed or printed name of person signing)	
	PRES	
	(Title of person signing)	