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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	RUGGI	IERI ENTERPR	ISES IN					
OCUMENT NUMBER:								
The enclosed Articles of Am	endment and fee are su	bmitted for filing						
Please return all corresponde	nce concerning this ma	tter to the followi	ng:					
	DEL	IA JIMENEZ FU	INDORA					
	Name of Contact Person							
	JIMENEZ ACCOUNTING OF WPB INC							
	Firm/ Company							
	4180 PINE GLADES RD							
	Address							
	WEST PALM BEACH;, FL 33406							
		City/ State and	1 Zip Cod	e				
	_	TAX@HOTMA						
E	-mail address: (to be us	sed for future ann	ual report	notification)				
For further information conce	erning this matter, pleas	se call:						
DELIA JIMENEZ	FUNDORA	at (561	471-4144				
Name of Con	tact Person	ar (Area Co	de & Daytime Telephone Number				
Enclosed is a check for the fo	ollowing amount made	payable to the Flo	orida Depa	artment of State:				
■ \$35 Filling Fee	I\$43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified Co (Additional c enclosed)	- py	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
P.O. Box 6	nt Section Corporations		Ameno Divisio Clifton 2661 f	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301				

Articles of Amendment to Articles of Incorporation of

RUGGIERI ENTERPRISES INC

(Name of Corporation as currently filed with the Florida Dept. of State) P18000070508 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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 abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 10260 NW 31ST CT B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) SUNRISE, FL 33351 - 6904 C. Enter new mailing address, if applicable: 10260 NW 31ST CT (Mailing address MAY BE A POST OFFICE BOX) SUNRISE, FL 33351 - 6904 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: Name of New Registered Agent 10260 NW 31ST CT (Florida street address) SUNRISE New Registered Office Address: , Florida (City) 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 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.

X Change	<u>PT</u>	ohn Doe		
X Remove	<u>v</u> .	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change			•••	
Add				·
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

C. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
HE CORRECT ADDRESS SHOULD BE	
10260 NW 31ST CT	
SUNRISE, FL 33351-6904	
THIS CHANGE APPLYS FOR EVERY SECTION IN WHICH THE ADDRESS IS LISTED	
	_
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)	
	.

	08/16/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
·	08/16/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this I document's effective date on the Do	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statemen reach voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	08/28/2018/	
Signature		
(By a c	director, president or other officer – if directors or officers have not been ad, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	VICTOR RUGGIERI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . . .