P19000019964

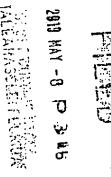
(Re	questor's Name)	_
	dress)	
(/ (0	u. 000)	
(Ad	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F		
14 14		

Office Use Only



900329029439

05/09/19--0;001--009 *+35.00



MOTATEL T

COVER LETTER

TO: Amendment Sec Division of Cor			r		
NAME OF CORPO	PRATION: RCL SIDING CO.	MPANY			
	IBER: P19000019964				
	s of Amendment and fee are su	ibmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	JOSE JARDIM JUNIOR				
		Name of Contact Perso	on		
	TAX DIRECT INCORPORA	ATED			
		Firm/ Company			
	5787 VINELAND RD 205				
		Address			
	ORLANDO, FL 32819				
		City/ State and Zip Co	de		
jij@	taxdirectflorida.com				
	E-mail address: (to be us	sed for future annual repor	t notification)		
For further information	on concerning this matter, pleas	se call:			
JOSE JARDIM JUN	TOR	407 at (203-1212		
Name	of Contact Person	Area C	ode & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Dep	partment of State:		
■ \$35 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		Street	Address		
	endment Section	Amendment Section			
	Division of Corporations		Division of Corporations		
), Box 6327		n Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RCL SIDING COMPANY (Name of Corporation as currently filed with the Florida Dept. of State) P19000019964 (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." 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: Name of New Registered Agent (Florida street address) 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 pos 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)

Remove

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: XChange. PT John Doe X Remove $\underline{\mathsf{Y}}$ Mike Jones X Add <u>\$V</u> Sally Smith Type of Action Title Name Address (Check One) D CLEITON GOMES DOS SANTOS, 1071 STATIONSIDE DR 1) ____ Change OAKLAND, FL 34787 X Remove 2) ____ Change _____ Add ____ Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change ____ Add

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
			· · · · - · - · · · · · · · · · · ·		
				-	
			 		
					_
	·				
f an amendment provides for an exch provisions for implementing the ame	ange, reclassifica	tion, or cancellat	tion of issued sha	res,	
(if not applicable, indicate N/A)	100000	thines in the unit	Control of the Contro		
		···			
					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated <u>C5/03/2019</u> Signature	
Signature	
By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
RENATO MORAES (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
DIZECTOR	
(Title of person signing)	

.