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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

<u>.</u>		,		
		COVER LETTER		19 OC SHARE
(C): Amendment Section Division of Corpor				
NAME OF CORPORA	ATION: RSBN CORP			9.
OOCUMENT NUMBE	ER:			*/
	f Amendment and fee are sul	omitted for filing.		
lease return all corresp	ondence concerning this mat	ter to the following:		
S	hemi Dotan			
_	anu a	Name of Contact Person		
	SBN Corp	Fi-m/Common		
3	363 Sunny Isles Blvd #801	Firm/ Company		
		Address		
<u> </u>	IMB, FL 33160	<u> </u>		
		City/ State and Zip Code	;	
Shemib	n@gmail.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Hamud Hamdan		at (561	672-4279	
Name of	Contact Person		le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:	
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis P.O. 1	ng Address ndment Section ion of Corporations Box 6327 hassec, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

		<u> </u>
(<u>Name of Corpora</u>	ition as currently filed with the Florida Dept. of State)	,5,
(Doct	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the following am	rendme
A. If amending name, enter the new name of the	corporation:	
	The	e new
	'corporation," "company," or "incorporated" or the abbreviation "Cc." or "Co". A professional corporation name must contain the previation "P.A."	
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(OX)	
D. If amending the registered agent and/or regist	tered office address in Florida, enter the name of the	
new registered agent and/or the new registered		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		
	(City) (Z.p Code)	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent,	egistered Agent: I am familiar with and accept the obligations of the position,	
, , , , , , , , , , , , , , , , , , , ,	, and position.	
Sig	nature 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.

Example: 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	Name	Address	
1) Change	VP	Eli Tal	16710 Senterra Dr	
X Add			Delray Beach, FL 33484	
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		·		
Add				
Remove				
		Page 2 of 4		
		ional Articles, enter change(s) here:		
(Attach additional sh	neets, if ne	cessary). (Be specific)		

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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
_	
	
	
Page 3 of 4	
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The date of each amendment(s) adoption:	, if Other than th
The date of each amendment(s) adoption: 11/25/2019 date this document was signed.	, if other than th
The date of each amendment(s) adoption: 11/25/2019 date this document was signed.	, if other than th
The date of each amendment(s) adoption:	, if other than th

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders was/were sufficient	7	The number of votes cast for the amendment(s)
		through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was	/were sufficient for approval
by	(voting group)	·
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	by the board of direc	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	by the incorporators	without shareholder action and shareholder
Dated November 25, 2	019	
Signature - /	magidant or other	officer – if directors or officers have not been
selected, by a		in the hands of a receiver, trustee, or other court
	Them:	Ber Natan nted name of person signing)
	(Typed or prir	nted name of person signing)
	Press	dient
(Title	of nerson signing)	