## P20 0000/0734

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RGS Entrerprises In	nc			
DOCUMENT NUM	IBER: P20000010734				
	s of Amendment and fee are sub	omitted for filing.			
Please return all corr	espondence concerning this mat	ter to the following:			
	Patricia Gadea				
		Name of Contact Person			
	RGS Enterprises Inc				
		Firm/ Company			
	2085 ATA South #105				
	Address				
	Saint Augustime FL 32080				
		City/ State and Zip Code			
	kitchen@italytilesandmarble.	com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas		9071201		
	e of Contact Person	at ( Area Co	) 9071201 de & Daytime Telephone Number		
	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

RGS Entrerprises Inc			
(Name of	Corporation as currentl	y filed with the Florida Dep	t. of State)
P20000010734			<u> </u>
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new nam	ne of the corporation:		
RGS Enterprises Inc ( correction of spellir			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		l professional corporation i	or the abbreviation "Corp.,"  name must contain the word
			THE T
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	B 27 PR
D. If amending the registered agent and	l/or registered office <u>add</u>	ress in Florida, enter the na	ame of the
new registered agent and/or the new	registered office address	<u>s:</u>	
Name of New Registered Agent N/A			
_	(Florida st	reet address)	
New Registered Office Address:	N/A		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	red agent. I am familiar	with and accept the obligation	
	Signature of New I	Registered Agent, if changing	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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 = ChiefExecutive 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			N/A
Add			
Remove			
2) Change	-		
Add			
Remove Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
F. 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)			
N/A			
,			

The date of each amendment(s) adoption	01/25/2020	, if other than the
date this document was signed.	m	
Effective date if applicable:	00.1	I- data)
	(no more than 90 days after amendment fi	(e aare)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirent of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for approval.	the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. The joint voting group entitled to vote separately on the am	following statement endment(s):
"The number of votes east for the	ne amendment(s) was/were sufficient for approval	
by N/A	;	•
	(voting group)	
02/25/2020		
DatedSignature	16	
(By a director selected, by	of, president or other officer – if directors or office an incorporator – if in the hands of a receiver, trus duciary by that fiduciary)	rs have not been stee, or other court
Patr	icia Gadea	
	(Typed or printed name of person signing)	
View	e President	
	(Title of person signing)	