P200000/4005

(Re	equestor's Name)	
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R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RENUEN CORPORPATIONP				
DOCUMENT NUMBER: P20000014005				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to	the following:			
DOMENICO MUEHLE				
Na	me of Contact Person			
RENUEN CORPORATION	RENUEN CORPORATION			
	Firm/ Company			
8180 19TH STREET				
	Address			
ALTA LOMA, CA 91701				
Cit	y/ State and Zip Code			
DMUEHLE@YANDEX.COM				
E-mail address: (to be used for	future annual report notification)			
For further information concerning this matter, please call: RANDALL BRUMBAUGH at (626) 429-9634				
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
Certificate of Status (A	A3.75 Filing Fee & S52.50 Filing Fee Sertified Copy Certificate of Status Certified Copy Certified Copy Inclosed) (Additional Copy Is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Please return to: R. Brumbaugh, Esq. 8780 19# 5+ suite 450			

Articles of Amendment to Articles of Incorporation of

O1

RENUEN CORPORATION

(Name of Corporation	n as currently filed with the f	lorida Dept. of State)
	P20000014005	,
(Docume	ent Number of Corporation (if i	(nown)
Pursuant to the provisions of section 607.1006, Florida sits Articles of Incorporation:	Statutes, this <i>Florida Profit Co</i>	rporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:	
name must be distinguishable and contain the word "cor" "Inc" or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional co	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDI	<u>RESS</u>)	
	<u></u>	****
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<i>S</i>	

 If amending the registered agent and/or registered new registered agent and/or the new registered o 		nter the name of the
Name of New Registered Agent		
-Nt	(Florida street address)	
	(1 to tau sir cer aduress)	
New Registered Office Address:	(City)	, Florida (Zip Code)
	,	,
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered agent. 1	am familiar with and accept th	ne obligations of the position.
Signal	ture of New Registered Agent,	f changing
2		·
Check if applicable The amendment(s) is/are being filed pursuant to s. 60	07 0120 (11) (a) ES	
2 1.12 amenoment(3) is are being thee pursuant to 5. Of	07.0120 (11) (0), 1.0.	

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)

Example:

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 Y. 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> </u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PSD	JAYME WINICK	925 CRESTA WAY #17
Add			SAN RAFAEL, CA 94903
X Remove			Q8(8
2) Change	PSD	DOMENICO MUEHLE	8180,19TH STREET Suito 450
X Add			ALTA LOMA, CA 91701
Remove Change			
Add			
Remove			44
4) Change	·		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:

•

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requipe Department of State's records.	tirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	r the amendment(s)
· ·	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the an	-
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		,,
	(voting group)	
APRIL 3	80, 2020	
Signature	Jayme Winick	
	directors president or other officer – if directors or office sted, by an incorporator – if in the hands of a receiver, trus	
	inted fiduciary by that fiduciary)	,
	JAYME WINICK	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	