## P200000 24988

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: RESERVE TRANS	SFER INC	
DOCUMENT NUM	P20000024988		
The enclosed Articles	s of Amendment and fee are sul	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	CORONA TAX SERVICES	INC	
		Name of Contact Persor	1
		Firm/ Company	
	3800 S OCEAN DR STE 216		
		Address	
	HOLLYWOOD, FL 33019		
		City/ State and Zip Code	
For further information	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report	notification)
		at (	_)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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)
An	niling Address mendment Section	Ameno	Address Iment Section
	vision of Corporations  D. Box 6327		on of Corporations entre of Tallahassee
	llahassee, FL 32314		N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

RESERVE	TRANSFER	INC
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A. If amending name, enter the new name of the corporation:  The new 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:  ISMAKOV VADIM	Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new 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:	The new incorporation name must contain the word
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new registered agent and/or the new registered office address:	Name of New Registered Agent    New Registered Office Address:   SMAKOV, VADIM   19900 WEST DIXIE HWY STE 11101   (Florida street address)   AVENTURA   AVENTURA   . Florida	
new registered agent and/or the new registered office address:	Name of New Registered Agent    New Registered Office Address:   SMAKOV, VADIM   19900 WEST DIXIE HWY STE 11101   (Florida street address)   AVENTURA   AVENTURA   . Florida	antar the name of the
Normand Vision Benefit and Association (SMAKOV, VADIM)	19900 WEST DIXIE HWY STE 11101  (Florida street address)  New Registered Office Address:  AVENTURA  Florida  Florida  , Florida	ė
Name of New Registered Agent	19900 WEST DIXIE HWY STE 11101  (Florida street address)  New Registered Office Address:  AVENTURA , Florida 33180	ት 2
19900 WEST DIXIE HWY STE 11101	New Registered Office Address: AVENTURA	
(Florida street address)	New Registered Office Address:	
New Registered Office Address: AVENTURA, Florida	(City) (Zip Code)	Florida
(City) (Zip Code)		(Zip Code)
		the obligations of the position.
19900 WEST DIXIE HWY STE 11101  (Florida street address)  New Registered Office Address:		

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)

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 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>	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	P	TERLETSKAIA, ELIZAVETA	19920 W DIXIE HWY # 10103
Add			MIAMI, FL 33180
Remove  2) Change	Р	ISMAKOV, VADIM	19900 WEST DIXIE HWY STE 11
X Add			AVENTURA, FL 33180
Remove 3) Change			
Add			<del></del>
Remove 4) Change			
Add			
Remove			
5) Change			
Add Remove			
6) Change		_	
Add			
Remove			

	adding additional and sheets, if necessar	יי). (Be specifi	z)			
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					_,	
f an amendm	ent provides for an	exchange, reclas	sification, or ca	ncellation of issu	ied shares,	
provisions fo	implementing the	amendment if ne	ot contained in t	the amendment i	itself:	
(if not ap <sub>i</sub>	olicable, indicate N/S	1)				
<del></del>	<del></del>					
<del></del>						
	<u></u>					

The date of each amendment(s) adopti date this document was signed.	on:		, if other than the
·			
Effective date if applicable:	(no more than	90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departr		icable statutory filing requirements	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or	r board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		he number of votes cast for the ame	ndment(s)
☐ The amendment(s) was/were approve must be separately provided for each			
"The number of votes east for th	ie amendment(s) was/w	ere sufficient for approval	
by	(voting group)	···	
	(voting group)		
DatedSignature	2020 O 24		
selected, by	or, president or other off an incorporator – if in t duciary by that fiduciar	ficer – if directors or officers have r he hands of a receiver, trustee, or o	iot been ther court
appenied i	VADIM	Ismako	
	(Typed or printed	I name of person signing)	
	Press	sal t	
	(Title of person s	signing)	