## P200000 40363

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

RichSource NAME OF CORPORATION:	e Global, Inc.
P20000040363 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fe	e are submitted for filing
·	· ·
Please return all correspondence concerning	this matter to the following:
Sara Oracle	
	Name of Contact Person
RichSource Global, In	nc.
1000 Johnnie Dodds	Firm/ Company Blvd., #266
Mount Pleasant, SC	Address 29464
	City/ State and Zip Code
sara.oracle@richsour	·
	(to be used for future annual report notification)
E nam address, (	to be used for facture mattan report notification)
For further information concerning this matter	er, please call:
Sara Oracle	831 902-5662
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	nt made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing I	Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee
Certificate of S	Status Certified Copy Certificate of Status
	(Additional copy is Certified Copy enclosed) (Additional Copy
	is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

RichSource Global, Inc.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	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.	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	70
C. Enter new mailing address, if applicable:	ا المسلم الم المسلم المسلم
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	<u>18:</u>
Name of New Registered Agent	
(Florida si	treet address)
New Desirement (Office Address)	
New Registered Office Address:	, Florida (City) (Zip Code)
	(17)
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Signature of New 1	regimered 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 = 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	$\underline{v}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u> </u>	Mohan Ellini	102 NE 2nd St., #129  Boca Raton, FL 33432
Add X Remove			
2) Change Add			
Remove 3) Change	<del></del>		
Add Remove 4) Change			
Add Remove			
5) Change			
Remove  Change			
Add			
Demove			

	<mark>ding or adding additiona</mark> additional sheets, if necessa	ary). (Be specific)			
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	endment provides for ar	n exchange, reclassific e amendment if not c	cation, or cancellation	on of issued shares,	
f an am		<u>e amendment if not c</u>	ontained in the amei	ndment itself:	
f an am provisi	ons for implementing the	74)			
f an am provisi (if i	ons for implementing the not applicable, indicate N	VA)			
f an an provisi (if	ons for implementing the not applicable, indicate N.	//A)			
f an an provisi (if	ons for implementing the not applicable, indicate N.	/A)			
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If an am provisi (if	ons for implementing the not applicable, indicate N	//A)			
If an am provisi (if	ons for implementing the not applicable, indicate N.	///////////////////////////////////////			
If an am provisi (if	ons for implementing the not applicable, indicate N.	///////////////////////////////////////			

The date of each amendment(s) a	doption:	, if other than the
date this document was signed. June	9, 2020	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendr afficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following state 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)	
June 23, 20	20	
Dated		
Signature	Jan Orasle	
	rector, president or other officer – if directors or officers have not be an incorporator – if in the hands of a receiver, trustee, or other	
	ted fiduciary by that fiduciary)	Count
	Sara Oracle	
	(Typed or printed name of person signing) CEO	
	(Title of person signing)	·····