P2C 0000096056

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RBI ENTERPRISE	ES INC			
	BER: P20000096056				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	WILLIAM R BARRICK				
	Name of Contact Person				
	RBI ENTERPRISES INC				
	Firm/ Company				
	21 CEDARWOOD CT				
	Address				
	PALM COAST, FL 32137				
	City/ State and Zip Code				
	RBARRICK 1975@GMAIL.	СОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, plea-	se call:			
WILLIAM R BARR	ICK	at (386	283-7499		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 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

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

FEED

RBI ENTERPRISES INC

2021 AUG 20 PM 3: 41

(Name of Corporation as currently filed with the Florida Dept. of State) P20000096056 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: RBI HOMES & ROOFING INC 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: Name of New Registered Agent (Florida street address) __, Florida_ New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: 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

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				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	:		<u>Addres</u> s	
1)Change				·		_
Add						
Remove						
2) Change						
Add						
Remove 3) Change						
Add						_
Remove						
4) Change			 -			<u> </u>
Add						
Remove					-	
5) Change						
Add						
Remove						
6) Change		-				_
Add						
Remove						

E. If amending or adding additional Article (Attach additional sheets, if necessary). (s, enter change(s) he Be snecific)	<u>re</u> :		
NONE				
				·
	-	<u></u>		
				
			-	
				
	-,.			
F. If an amendment provides for an exchange	ge, reclassification, o	r cancellation of issu	ed shares	
provisions for implementing the amendr (if not applicable, indicate N/A)	nent if not contained	in the amendment is	self:	
NONE				
		<u></u>		
	-			

•

	AUGUST 12, 2021	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
A Effective date <u>if applicable</u> :	UGUST 12, 2021	
anective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes co	st for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
AUGUS	r 12, 2021	
Dated Signature	William B. Barrick	
	director, president or other officer - if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciary)	
	WILLIAM R BARRICK	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	