Division of Corporations

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	Fax Number	: (850)617-6380	
	From:		
		: J. FISCHER & ASSOCIATES, INC.	202
<b>!</b>		: 119990000042	$\sim$
	Phone	: (561)799-3810	
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN DEW DROPS II, INC.

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Help MAR 3 1 2021

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**Articles of Amendment** 

to Articles of Incorporation of 2021 HAR 30 PH 12: 58

The new

DEW DROPS II, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State)

P20000098409

(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:

## RAPTIS CORPORATION

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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) 128 AUSTRALIAN AVE

PALM BEACH FL 33480

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

128 AUSTRALIAN AVE

PALM BEACH FL 33480

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	ADRIENNE RAPTIS		
	128 AUSTRALIAN AVE		
	(Florida street address)	<u> </u>	
New Registered Office Address:	PALM BEACH	Florida 33480	
	(City)	(Zip Code)	

<u>New Registered Agent's Signature, if changing Registered Agent:</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

Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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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 ds a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	<u>John Doç</u>	
X Remove	Σ	Mike Jones	Ö
X Add	<u>\$V</u>	Sally Smith	PH 12
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address 55
1) Change	P	BRYN WILKINS	3300 PGA BLVD
, Add			STE 605
X Remove			PALM BEACH GARDENS FL 33
2) Change	Р	MATTHEW RAPTIS	128 AUSTRALIAN AVE
X Add			PALM BEACH FL 33480
Remove	vs	ADRIENNE RAPTIS	128 AUSTRALIAN AVE
X Add			PALM BEACH FL 33480
Remove			
4) Change		. <u> </u>	
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Remove			
5) Change	·		
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Remove			
6) Change			
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attach additional sheets, if necessary). (Be specific)		· *
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The date of each amendment date this document was signed.		<u></u>		, if other than t
-	03/26/2021	2021 H	MR 30 PH 12	
Effective date <u>if applicable</u> :	(no	more than 90 days af	ter amendment file da	10
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doption of Amendment(s)	(CHECK	(ONE)		
The amendment(s) was/were action was not required.	adopted by the incor	porators, or board of c	lirectors without shar	eholder action and shareholder
The amendment(s) was/were by the shareholders was/we			of votes cast for the a	amendment(s)
The amendment(s) was/were must be separately provided				
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sel	· · ·	or other officer 4 if dia ator – if in the hands o nat fiduciary)		
	ADRIENNE RAI	PTIS		
	(Typed	d or printed name of p	erson signing)	

(Title of person signing)

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