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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RONLCORP				
DOCUMENT NUMI					
	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	YVANA RODRIGUEZ				
		Name of Contact Person	n		
	ROD CONSULTING INC				
	Firm/ Company				
	68 SE 6TH ST APT 1806				
	Address				
	MIAMI FL 33131				
	City/ State and Zip Code				
	RÓDCONSULTINGINC@GMAIL.COM				
	E-mail address: (to be u	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea	se call:			
YVANA RODRIGUI	EZ.	786	6838571		
Name	of Contact Person	at (786) 6838571 Area Code & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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 Tallahussee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment

10

Articles of Incorporation

Roni	(acp or		
(Name)	of Corporation as currently	filed with the Florida De	pt. of State)
P21000013931			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Iorida Profit Corporation :	adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
RONI CONSULTING CORPORATION	!		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cochartered," "professional association,"	"orp," "Inc," or "Co". A		" or the abbreviation "Corp"
B. Enter new principal office address. (Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent at new registered agent and/or the new registered agent agent and/or the new registered agent agen	OFFICE BOX) id/or registered office addr		ame of the
	YVANA RODRIGUEZ		
Name of New Registered Agent	304 PALERMO AVE	- N	
	tFlorida stre	et address)	 _
New Registered Office Address:	CORAL GABLES		. Florida 33134
See region ten office, reneval.	1	City	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. I am fàmiliar w	ith and accept the obligation	FILE.
Charle Country L.	ingrimme of the high	Sometime is enoughing	GRSC 1771 6 A Si
Check if applicable ■ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11) (e), F.S.	10

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.

X Change	<u> </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	P	IVAN ROA	68 SE 6TH ST APT 1806
Add			MIAMI FL 33131
X Remove			
2) Change	D	YVANA RODRIGUEZ	304 PALERMO AVE
X Add			CORAL GABLES FL 33134
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N.4)	(Attach <i>ad</i>	ing or adding additional Article ditional sheets, if necessary) — (<u>a viici viiange(s)</u> Be specifici	<u></u> .		
provisions for implementing the amendment if not contained in the amendment itself:		. ,				
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	<u>provisio</u> (if ne	ot applicable, indicate $N(A)$	inem is not contai	neg in the amendu	ient usen.	
						
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	on:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	ono more than 90 days after amendment f	
	(no more than 90 days after amendment f	ile date)
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory filing requirent of State's records.	rirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for ent for approval.	the amendment(s)
	d by the shareholders through voting groups. The voting group entitled to vote separately on the an	
"The number of votes east for i	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
04/02/2021 Dated		
Signature	-112	
selected, by	or, president or other officer – if directors or office an incorporator – if in the hands of a receiver, trus duciary by that fiduciary)	rs have not been stee, or other court
	Vana Rodragez (Typed or printed name of person signing)	
	Director	
	(Title of person signing)	_