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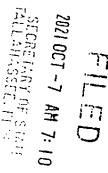
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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION:	Orchid Raily International Inc
DOCUMENT NUMBER:	P210000 34447
The enclosed Articles of Amendmen	t and fee are submitted for filing.
Please return all correspondence con-	cerning this matter to the following:
	Scott Rinder Name of Contact Person
	Name of Contact Person Orchia Reach Internation Inc Firm/ Company
	17990 Via Bellanare lance
	Minmer Lakes fr. 32913 City/ State and Zip Code
E-mail ac	S finder @ Gnoul. com ddress: (to be used for future annual report notification)
For further information concerning the	his matter, please call:
Name of Contact Per	at (336) 248-6655 Area Code & Daytime Telephone Number
Name of Contact Pers	Son Area Code & Daytime Telephone Number
Enclosed is a check for the following	g amount made payable to the Florida Department of State:
	S Filing Fee & Seate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Seate of Status Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpo P.O. Box 6327 Tallahassee, FL 32	rations Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

Articles of Amendment to

FILED

Articles of Incorporation

2021 OCT -7 AM 7: 10

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		ed with the Florid	a Dept. of State	Err (riv
	<u> 1034447</u>			
(Docum	nent Number of Co	rporation (if know	n)	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Flor	rida Profit Corpora	ation adopts the following	; amendment(s) to
A. If amending name, enter the new name of the co	orporation:			
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc.," "chartered," "professional association," or the abbre	or Co Ann	pany," or "incorpo ofessional corpora	man de la	The new "Corp.," the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	:: DRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	- - - -			
D. If amending the registered agent and/or register new registered agent and/or the new registered of Name of New Registered Agent	red office address office address:	in Florida, enter t	he name of the	
Name of New Registered Agent				
	(Florida street u	ddress)		
New Registered Office Address:	(Cin	,	, Florida	wles
			<i>12.19</i> CO	
New Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent.	istered Agent: I am familiar with o	and accept the obli	gations of the position.	
- 				
Signa	ture of New Regist	ered Agent, if chan	ging	
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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>D</u>	_ Jeff Tiefenback	3762 Pinovistallay 4 Estero, FL 33928
Add		'	<u>Estero, M. 339</u> 28
Remove 2) Change Add	D	Scott Rinden	17996 via Bellamareln Miromar Lakes, FL 33915
Remove 3) Change			
Add			
Remove 4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

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ravisians for implem	enting the amen	iament if noi	contained in	the amendme	<u>nt itself:</u>		
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The date of each amendment(s) ad	9 15 2	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	late)
Note: If the date inserted in this badocument's effective date on the De	ock does not meet the applicable statutory filing requires partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sha	archolder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The foli- each voting group entitled to vote separately on the amend	owing statement Iment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated Oct 4, 2	021	
Signature Jennih Sprin	Em (Oct 4 202) 1143 ED7)	
(By a d selecte	rector, president or other officer – if directors or officers had an incorporator – if in the hands of a receiver, trustee ed fiduciary by that fiduciary)	nave not been
	Jennifer Springer 12	inden
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	