## P21000043591

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: RATP INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SUSAN M. CORBIN Name of Contact Person SUE CORBIN P.A. SYOP OVERSOAS HWY E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of 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** Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

0 20 . > -

(Name of Corporation as currently filed with the Florida Dept. of State) P21000043591 (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: 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) New Registered Office Address: (City) 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

Check if applicable

 $\square$  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.

X Change	PT John	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	TREAS	LICHAEL DAVIDSON	43515 MERRILL
X Add			4351S MERRILL STERUNG HEIGHTS, MI
Remove			48314
2) Change			
Add			
Remove 3) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			SECREIA TALLA
Add			REIAH LLAH
Remove			HAN 25
6) Change			PM 2: 47 OF STATE SEE, FU
Add			FL FATE
Remove			• • • •

The date of ea		nent(s) adoption:, if other than the
Effective date		
		(no more than 90 days after amendment file date)
		in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
Adoption of A	Amendment	(s) (CHECK ONE)
The amend action was	ment(s) was not required	/were adopted by the incorporators, or board of directors without shareholder action and shareholder .
		/were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.
		were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The	number of v	rotes east for the amendment(s) was/were sufficient for approval
by _		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		(voting group)
	Dated	05/10/2023
	Signatur	e e
	J	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
		SUSAN M. WRBIN
		(Typed or printed name of person signing)
		(Typed or printed name of person signing)  INCORPORATOR   REG. AGENT
		(Title of person signing)

