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COR AMND/RESTATE/CORRECT OR O/D RESIGN REIN INDUSTRIES INC.

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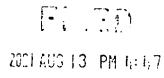
COVER LETTER

TO:	Amendment Section			
	Division of Corporation	s		

Division of Corp	orations			
NAME OF CORPO	RATION: REIN INDUSTRIE	S INC.		
DOCUMENT NUM	BER: P21000066484			
	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	Cheyenne Moseley			
		Name of Contact Persor	1	
	LegalZoom.com, Inc.			
		Firm/ Company		
	101 N. Brand Blvd., 11th Flo	ог		
		Address	•	
	Glendale, CA 91203			
		City/ State and Zip Cod	e	
	Omarclarke1976@gmail.com	1		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Cheyenne Moseley		800 at (773-0888 ext. 9724	
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Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	S43.75 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)	
	iling Address		Address	
	endment Section		lment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
	lahassee, FL 32314	2415 }	N. Monroe Street, Suite 810 assee, FL 32303	

From: Sylvia Pauli

Articles of Amendment to Articles of Incorporation of



	10		
REIN INDUSTRIES INC.			STORETARY OF STATE
(Name	of Corporation as current	y filed with the Florida	
21000066484			
	(Document Number of	f Corporation (if known))
Pursuant to the provisions of section 607. 18 Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporat	tion adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		•
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cocarrered," "professional association,"	Corp." "Inc." or "Co"	4 professional corporat	
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	icable: OFFICE BOX)		
muning maress provided to the first transfer of tr	<u> </u>		
·			
 If amending the registered agent as new registered agent and/or the ne 			ie name of the
	Sandra Pratt Clarke	-	
Name of New Registered Agent	344 SW Tulip Blvd.		
		reet address)	
	Port Saint Lucie	EE 1 40 20 123)	34953
New Registered Office Address:	TOT Saint Locie	(City)	, Florida 34953 (Zin Code)
		((.)())	(Ep Code)
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Agent tered agent. I am familiar	: with and accept the oblig	zations of the position.
	Sel	we	Sandra Pratt Clarke
	Signature of New F	egistered Agent, if chang	eing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

To: 18506176380 ' 'Page: 5 of 7 2021-08-13 10:09:26 PDT LegalZoom.com, Inc. From: Sylvia Pauli

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 Jot</u>	nı Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Junes	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	DPTS	Omar Reinford Clarke	344 SW Tulip Blvd.
Add			Port Saint Lucie, Florida 34953
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

 2021-08-13 10:09:26 PDT

LegalZoom.com, Inc.

From: Sylvia Paull

Attach additional shee	g additional Art ets, if necessary).	(Be specific)				
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		· 				
f an amendment pro	wides for an ave	hanga radassif	iostion or one	allation of iccurs	d charac	
provisions for imple	menting the am-	endment if not	contained in the	amendment its	elf:	
(if not applicable	, indicate NA)					
		······				
				 -		
 ,						

	08/03/2021	
The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date will not of State's records.	ot be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action and sh	areholder
The amendment(s) was/were adopted by by the shareholders was/were sufficient (the shareholders. The number of votes cast for the amendment(s) for approval.	
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the a	mendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
Dated	21 Clarka	
selected, by an	oresident or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iary by that fiduciary)	
	einford Clarke	
	(Typed or printed name of person signing)	
Preside	nt	
	(Title of person signing)	