P21000070716

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A. Butter 10/22/21

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: RSB GENERAL S	ERVICES CORP	
DOCUMENT NUM	IBER: P21000070716		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	RODRIGO BARBOSA DA S	SILVA	
		Name of Contact Person	1
	RSB GENERAL SERCICES	CORP	
	·	Firm/ Company	
	22745 SW 66th Ave Apt 104		
		Address	·
	Boca Raton, Fl 33428		
		City/ State and Zip Code	······································
	accounting@safewayfl.com		
		sed for future annual report	notification)
For further informat	ion concerning this matter, plead	se call:at (_) 683 1767
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di P.s	ailing Address nendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

1 m b

RSB GENERAL SERVICES CORP

(Name of Corporation as cur	rently filed with the Fl	orida Defit of States	
P21000070716		1000	1115.45
(Document Num	ber of Corporation (if kr	own) / 1	5 8 (A) F [E] (F)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this <i>Florida Profit Cor</i>	poration adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>		
			The new
name must be distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp," "Inc," or "Co" chartered," "professional association," or the abbreviation".	". A professional corp		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(Frincipal office address MOST BLASTREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Mulling dutiess MAT DE ATOST OFFICE BOA)		 	
			
D. IC. and the second s	add as to Plant I am		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-		ter the name of the	
Name of New Registered Agent			
(Flori	ida street address)		
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered A	uomfi		
I hereby accept the appointment as registered agent. I am fami	iliar with and accept the	obligations of the po.	sition.
	-		
		- 	
Signature of N	lew Registered Agent, if	changing	
Check if applicable			

 \Box 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	ADRIANA YUMI KAWASOKO	22745 SW 66th AVE APT 104
Add			Boca Raton, FL 33428
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			***
6) Change			
Add			
Remove			

	(Be specific)
	<u> </u>
, <u> </u>	
	· · · · · · · · · · · · · · · · · · ·
PC	
	B
	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	

••

The date of each amendment(s) adopt date this document was signed.	ion:	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Depart	does not meet the applicable statutory filing requirements, ment of State's records.	, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the amerent for approval.	ndment(s)
	ed by the shareholders through voting groups. The following a voting group entitled to vote separately on the amendment	
	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voung group)	
09/17/2021 Dated	 	
Signature(By a direct	Redricy Bulgary da Sulver, president or other officer - if directors or officers have no	ot been
selected, by	an incorporator – if in the hands of a receiver, trustee, or of duciary by that fiduciary)	
	(Typed or printed name of person signing)	

(Title of person signing)