

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

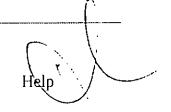
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COR AMND/RESTATE/CORRECT OR O/D RESIGN REYCO IMPORTS INC.

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Electronic Filing Menu

Corporate Filing Menu



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October 28, 2022

FLORIDA DEPARTMENT OF STATE Division of Corporations

REYCO IMPORTS INC. 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702US

SUBJECT: REYCO IMPORTS INC.

REF: P22000019834

We received your electronically transmitted document. However, the, document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheets.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L11000132787.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline FAX Aud. #: H22000369382

Regulatory Specialist II Supervisor Letter Number: 022A00024300

Articles of Amendment to Articles of Incorporation of

	of		
REYCO IMPORTS Inc.			
(Name o	f Corporation as currently fi	iled with the Florida Dept. of State)	
P22000019834			
	(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
Direct Operations Supplies Inc			The Servi
name must be distinguishable and contain	the word "corporation," "com orp," "Inc," or "Co". A p	npany," or "incorporated" or the abbreviation rofessional corporation name must contain	the word
B. Enter new principal office address, (Principal office address MUST BE A S			•
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) - d/or registered office addres:	s in Florida, enter the name of the	M 8: 49
-	Registered Agents	Inc	
Name of New Registered Agent	7901 4th St N STE		
	(Florida street		
New Registered Office Address:	St. Petersburg	Florida 33702	
New Registered Office Hadress.	(Ci		ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	nanging Registered Agent: ered agent. I am familiar with	h and accept the obligations of the position.	

Signature of New Registered Agent, if changing

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	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
i) Change		_		2027	
Add				2022 HOV	
Remove					
2) Change					
Add				<u></u>	
Remove 3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

The date of each amendment(s) adoption:		, if other than the		
date this docu	ment was signed.			
Effective date	e if applicable: (no more than 90 days after amendment file date)			
	date inserted in this block does not meet the applicable statutory fiting requirements, this date will flective date on the Department of State's records.	vill not	be listed	as the
Adoption of a	Amendment(s) (CHECK ONE)			
	lment(s) was/were adopted by the incorporators, or board of directors without shareholder action a not required.	nd share	cholder	
	Iment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) reholders was/were sufficient for approval.			
	Iment(s) was/were approved by the shareholders through voting groups. The following statement eparately provided for each voting group entitled to vote separately on the amendment(s):	-	AON 2202	•
"The	number of votes cast for the amendment(s) was/were sufficient for approval	·.	- A0	. !
by _	(voting group)	7.4	-2	
	(voting group)		VM 8: 49	2
	Dated 10/28/2022	7.7.	: 49	
	Signature			
	(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)			
	Dmitry Reyfman			
	(Typed or printed name of person signing)			
	President			

(Title of person signing)