## P22000023554

(Red	questor's Name)	
(Add	dress)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer	· · · ]
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A. BUTLER AUG - 1 2022



## 镠 **COVER LETTER** 5 TO: Amendment Section Division of Corporations NAME OF CORPORATION: C&F OLAF INC DOCUMENT NUMBER: P22000023554 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RONALD FOWLER Þ Name of Contact Person C&F OLAF INC $\triangleright$ Firm/ Company Ð 7923 HERON LANE Address YOUNGSTOWN FL 32466 മ City/ State and Zip Code OLAFINSULATION@GMAIL.COM E-mail address: (to be used for future annual report notification) 0 For further information concerning this matter, please call: RONALD FOWLER at ( S50 ) 381-0594 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

\$43.75 Filing Fee & Certificate of Status □ \$35 Filing Fee Certified Copy

☐\$43.75 Filing Fee & (Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

**Mailing Address** Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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## Articles of Amendment to

(Per # 1 gran

	Articles of Incorporation of	
&F OLAF INC	01	2022 AUG - 1 PM 2:52
(Name of Cor	poration as currently filed with the F	Harida Dant of State)
န္ှ2000023554		TATTAPA COF STATE
(	Document Number of Corporation (if k	known)
tursuant to the provisions of section 607.1006, Articles of Incorporation:	Florida Statutes, this Florida Profit Co	rporation adopts the following amendmen
A. If amending name, enter the new name of	f the corporation:	
RTIC INSULATION INC		The new
name must be distinguishable and contain the wo 'Inc.," or Co.," or the designation "Corp," Thartered," "professional association," or the	"Inc," or "Co". A professional co	corporated" or the abbreviation "Corp" rporation name must contain the word
Enter new principal office address, if app Principal office address MUST BE A STREE		
<u></u>	· · · · · · · · · · · · · · · · · · ·	***************************************
อี		·
<ul> <li>Enter new mailing address, if applicable:</li> <li>(Mailing address MAY BE A POST OFFICE)</li> </ul>		
<del>;</del>		
b. If amending the registered agent and/or r new registered agent and/or the new regis		nter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	Florida (Zip Code)
		,
New Registered Agent's Signature, if changing the hereby accept the appointment as registered a	ng Registered Agent: ngent. I am familiar with and accept th	e obligations of the position.
	Signature of New Registered Agent, i	f changing

€}

Pamending 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:

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 Schange, 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	
ر <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			
Add  Remove			
thange			
: Add			
Remove 3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change Add	<del>-, -</del>		
Remove			
6) Change			
Add			
Remove			
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If amending or adding additional (Attach additional sheets, if necessar	ry). (Be specific)	
- Mar		······································
1		
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		<del>.</del>
		<u></u>
If an amendment provides for an provisions for implementing the (if not applicable, indicate N/2)	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:  4)	
		<del></del>
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	each amendment(s) adoption:, if other than the cument was signed.
7	ate if applicable:
2	(no more than 90 days after amendment file date)
	e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
Adoption a	f Amendment(s) (CHECK ONE)
	ndment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder as not required.
	ndment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) nareholders was/were sufficient for approval.
	ndment(s) was/were approved by the shareholders through voting groups. The following statement separately provided for each voting group entitled to vote separately on the amendment(s):
5	he number of votes cast for the amendment(s) was/were sufficient for approval
by *	(voting group)
ല	08/01/2022 Dated
?	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
1	appointed fiduciary by that fiduciary)
1	RONALD A FOWLER
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)

Q