Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000273260 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KIJOENNA SERVICES INC

Account Number : I20080000033 : (305)644-3055 Fax Number : (305)644-3052

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

Email Address:	
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COR AMND/RESTATE/CORRECT OR O/D RESIGN **RUTH ROSE INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

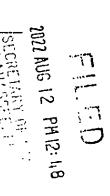
J. HORNE

AUG 1.5 2022

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COVER LETTER

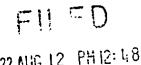
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RUTH ROSE INC				
DOCUMENT NUM	000000000000000000000000000000000000000				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	ENNAQ DIEPPA				
		Name of Contact Person			
	KIJOENNA SERVICES INC	:			
		Firm/ Company			
	2141 SW 1 ST STE 110				
		Address			
	MIaMI, FL 33135				
		City/ State and Zip Code			
	KRISJOENNA@YAHOO.C	ОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call;			
*Y	" & C D	at ()de & Daytime Telephone Number		
Name	of Contact Person	Area Coo	ae & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fce & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	alling Address		Address		
	nendment Section vision of Corporations	Amendment Section Division of Corporations			
	Vision of Corporations	The Control of Tollahaana			

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 4

Articles of Amendment to Articles of Incorporation



8

	of	2022 AUG 12 PA 12. 40
RUTH ROSE INC		SECRETARY OF
(Name of Corpora	tion as currently filed wi	th the Florida Dept. of State)
P22000057751		
(Docu	ument Number of Corporat	tion (if known)
Pursuant to the provisions of section 607.1006, Florints Articles of Incorporation:	da Statutes, this <i>Florida P</i>	rofit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the	corporation:	
RUTH ROSES INC		The new
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	c," or "Co". A professi	or "incorporated" or the abbreviation "Corp.," ional corporation name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B		
(muning undress (MAC BE AT VOT VITTEE E		
D. If amending the registered agent and/or registered new registered agent and/or the new registered		orida, enter the name of the
Name of New Registered Agent		
	(Florida street addres	(3)
New Registered Office Address:		, Florida
	(Clty)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	logistered Agent: t. I am familiar with and a	accept the obligations of the position.
Stg	gnature 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)

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	SY	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		<u> </u>	
Add			
Remove			
2) Change		·	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
, Add		,	
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
——————————————————————————————————————	

	03/11/20)22	08/12	122	, if other than the
The date of each amendment(s) adop	ption:	<u> </u>	00//~	/ ~2_	, it other man the
date this document was signed. 08/11/2	2022		00/1	- /	
Effective date if applicable:			08/12	-122	
	(no i	more than 9	0 days after am	endment file dat	e)
Note: If the date inserted in this block document's effective date on the Department.	ck does not me artment of State	et the applic	cable statutory	filing requireme	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK	ONE)			
The amendment(s) was/were adopt action was not required.	ted by the incorp	porators, or	board of directo	ors without share	holder action and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff			e number of vo	tes east for the a	mendment(s)
☐ The amendment(s) was/were appro must be separately provided for ea	oved by the shar ach voting group	rcholders thr p entitled to	rough voting gro vote separately	oups. The follow y on the amendm	ving statement ent(s):
"The number of votes east fo	r the amendmen	nt(s) was/we	ere sufficient fo	r approval	
by				,,,	
•)	(voling gi	roup)		<u></u>	
08/11/2022 Dated	08/12	1/22			
Signature R	JL De	LANTS	2		
By a dire	ector, president	or other offi	icer - if director	rs or officers hav	e not been
				ceiver, trustee, o	
appointe	d fiduciary by th	hat fiduciary	()		
R	UTH DUARTE	E			
_	(Туре	od or printed	name of persor	n signing)	
P	RESIDENT	Rut	th Duc	wite	
_	(Title	of person si	igning)		