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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: RRMG ITALIAN	GROUP INC				
DOCUMENT NUM	1BER: P24000064450					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	MASSIMO REBOA					
		Name of Contact Per	son			
	MASSIMO REBOA, P.A.					
	Firm/ Company					
	12 SE 7th Street Suite 704					
		Address				
	Fort Lauderdale, FL 33301					
		City/ State and Zip C	ode			
	lawfirm@reboa.law					
	E-mail address: (to be us	sed for future annual rep	ort notification)			
For further informati	on concerning this matter, pleas		530, 0781			
	e of Contact Person	at () 530-9781 Code & Daytime Telephone Number			
	for the following amount made					
Enclosed is a check	of the following altioutit made	payable to the Florida 12	charment of State.			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	E □\$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		Ame Divi The	et Address endment Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

RRMG ITALIAN GROUP INC

(Name of Corporation as cu	rrently filed with the Florid	da Dept, of State)	
P24000064450			
(Document Nun	iber of Corporation (if know	m)	
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florida Profit Corpor</i>	ation adopts the followin	g amendment(s) (
A. If amending name, enter the new name of the corporation	<u>on:</u>		
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation	o". A professional corpor	orated" or the abbreviation name must contai	_ Thenew on "Corp"," n_the_word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent	e address in Florida, enter		
stane of sew negatived agent			-
(Flor	rida street address)		-
New Registered Office Address:		Florida	
	(City)	(Zip)	Tode)
<u>Sew Registered Agent's Signature, if changing Registered A</u> hereby accept the appointment as registered agent. I am fan.		ligations of the position.	7024 Y9V
Signature of !	New Registered Agent, if cha	ınging	25
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120) (11) (e), F.S.	ָרָידָ. רְיִדָּ	PA 4:

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:

 $P = President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR - Frustee; \ C - Chairman or Clerk; \ CEO - Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office here. President, Treasurer, Director would be PTD.$

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.

Mike Jones, V as Remov	v, and Sa	lly Smith, SV as an Add.	
Example: <u>X</u> Change	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	RAGOSTA, ROBERT	1520 NW 43 ST
Add			FORT LAUDERDALE, FL 33433
X Remove			
2) Change	Р	RAGOSTA, ROBERTA	1520 NW 43 ST
X Add			FORT LAUDERDALE, FL 33433
Remove 3) Change	VP	GUARINO, MICHAEL	1125 S MILITARY TRAIL
Add			DEERFIELD BEACH, FL 33443
X Remove			
4) Change	VP	GUARINO, MANUEL	1125 S MILITARY TRAIL
X Add			DEERFIELD BEACH, FL 33443
Remove			
5) Change			
Add			
Remove			
6) Change			- 3
Add			
Remove			(i) (ii) (iii) (ii
			SCE. F.

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
(Macu adamona sneets, y necessary). The specific	
	<u> </u>
	<u> </u>
	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(у пов аррисаоче, тасше взя)	
	
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	. , ⊕

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> :	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requoument's effective date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors withou action was not required.	it shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the ar	
"The number of votes cast for the amendment(s) was/were sufficient for approva	1
by	, -
(voting group)	
11/19/24 Dated	
Signature Scherts Registra state 19, 2024 17 58 157	
(By a director, president or other officer—if directors or office selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	
Ragosta, Roberta	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

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OF TALLA TYSSEE, FL