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OCT 03 2018

S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: RYMARK INTER	NATIONAL, INC			
DOCUMENT NUMBE	D04000003130				
The enclosed Articles of	f.Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
J	AMES RYE				
	Name of Contact Person				
F	RYMARK INTERNATIONAL				
_		Firm/ Company			
5	5432 BROOKLINE DRIVE				
	Address				
C	ORLANDO, FL 32819				
_	 -	City/ State and Zip Code	2		
irve@r	ymarkinternational.com				
		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
JAMES RYE		at (407	758-1080		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment of State:		
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment to Articles of Incorporation of

RYMARK INTERNATIONAL INC

(Name of Corporation as curre	tly filed with the Florida Dept. of State)
P94000093120	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
RyEvent Inc	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	na
(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)	na Silvi Coo pri
	<u> </u>
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.	·
Name of New Registered Agent	
	The state of the s
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt·
I hereby accept the appointment as registered agent. I am familia	
MA	
Signature of New	Registered Agent, if changing

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

na 	additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
			
	 		
			
	 		
	· · · · · · · · · · · · · · · · · · ·	·	
	 		
16 a.s. s.	mandmant neuvidae fae un ava	hange goalassification or concellation of	issued shouse
	ions for implementing the am-	hange, reclassification, or cancellation of i endment if not contained in the amendmen	issueu_shares, nt itself:
provis	(not applicable, indicate N/A)	= :	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date	·)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the am by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required.	shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	holder
09/24/2018	
Dated	
Signature	
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)	
James Rye	
(Typed or printed name of person signing)	
President	
(Title of person signing)	