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Office Use Only



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COVER LETTER

TO: Amendment Sec Division of Corp			: .
NAME OF CORPO	RATION: Reynolds & Razza.	Inc.	
	BER: P95000053444	DEPENDE '	
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Mary Reynolds		
		Name of Contact Person	<u> </u>
		Firm/ Company	
	125 May Street		
	Orange City, FL 32763	Address	
		City/ State and Zip Code	2
	reynolds.m@live.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Mary Reynolds		at (<u>386</u>	775-4277
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & 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)
An Di P.C	nailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

11 0 B

Revnolds & Razza, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P95000053444 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Reynolds & Associates, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with 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)

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 Doe	ne cl	nanges
X Remove	<u>V</u>	Mike Jones		J
X 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				
2) Change		_		_
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change	 -			
Add				
Remove				
5) Change				
Add				
Remove				
б) Change		<u> </u>		
Add				
Remove				

If amending or add (Attach additional st	neets, if necessary). (Be specific)		Nove	ل ا
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		<u> </u>				
		<u>-</u>				
If an amendment p	provides for an explementing the applicate N/A)	mendment if no	ification, or ca t contained in t	ncellation of issu he amendment i	ed shares, tself:	none
(у ка арумса	me, mureure mm					
		·				
					· <u>-</u>	

		February 23, 2021	ic ast a standation of
	each amendment(s) ac ument was signed.	loption:	, if other than the
tane tins tioe		uary 23, 2021	
Effective da	te <u>if applicable</u> :	<u> </u>	
		(no more than 90 days after amendment file date)	
		lock does not meet the applicable statutory filing requirements, this date partment of State's records.	e will not be listed as the
Adoption of	Amendment(s)	(CHECK ONE)	
	idment(s) was/were add s not required.	pted by the incorporators, or board of directors without shareholder action	n and shareholder
	ndment(s) was/were add areholders was/were st	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.)
		proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	nt
		for the amendment(s) was/were sufficient for approval	
by		(voting group)	
	February 2 Dated		
	Signature (D)	Mary Peynolde irector, president or other officer - if directors or officers have not been	
	selecte	trector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
		Mary Reynolds	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	