P971000016018

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	Rasol All City App	parel Co.	
DOCUMENT NUMBI	P97000016018 ER:		
The enclosed Articles o	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
F	Mejandro Rossi		
1.	Rasol All City Apparel Co.	Name of Contact Person	n
	900 Tarpon Drive	Firm/ Company	
	niramur , fl 33023	Address	
_		City/ State and Zip Cod	e
accoun	ting@allcityapparel.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information (concerning this matter, pleas	se call: 954	989-6561
Name of	Contact Person	at (Area Co) de & Daytime Telephone Number
	the following amount made		
■ \$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend	Address Iment Section on of Corporations

Articles of Amendment to Articles of Incorporation of

RASOLALL CITY APPAREL CO.

(Name c	of Corporation as curren	atly filed with the Florida I	Dept. of State)
1º97000016018			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporatio	\overline{n} adopts the following amendment(s) to
A. <u>If amending name, enter the new name</u> . ES Trading Co.	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	vation "Corp," "Inc," or	"Co". A professional cor	
· ·		n/a	
B. Enter new principal office address, (Principal office address MUST BE A S			
. 33		-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		n/a	T SECOND
			M Sign
D. If amending the registered agent ar			name of the
new registered agent and/or the new		<u>!SS:</u>	De la companya della companya della companya de la companya della
Name of New Registered Agent	n/a		
	(Florida	street address)	
New Registered Office Address:	n/a		, Florida
wew negatives office from Can.		(City)	(Zip Code)
New Registered Agent's Signature, if c Thereby accept the appointment as regist	hanging Registered Age	nt: which and accent the obliga	ntions of the position
r nevery accept the appointment as regist	erea ageni. Tam jamaa	r with and accept the bongo	anoms of the position.
	Signature of New	Registered Agent, if changi	ing

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: XChange	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	n/a		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			, <u></u>
5) Change			
Add			
Remove			
(i) Change			
Add			
Domara			

	onal sheets, if necessary	'). (Be specific)				
						
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nrovisions fo	nent provides for an expression from the action of the act	<u>schange, reclassing</u>	cation, or cancer antained in the a	mondment itself	snares, ·-	
(if not a	oplicable, indicate N/A)	netionient it not es	miamed in the a	menament asen	<u>•</u>	
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	11411110	7/7	17/18		
The date of each amendment(s) adoption date this document was signed.			7710	.	, if other than the
7/27/18 Effective date <u>if applicable:</u>	1				
партеане.	(no mor	e than 90 day;	s after amendment	file date)	-
Note: If the date inserted in this bloc document's effective date on the Depart	k does not meet the tment of State's red	he applicable : cords.	statutory filing req	uirements, this date v	vill not be listed as the
Adoption of Amendment(s)	(CHECK ON	<u>{E</u>)			
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the sharehold lient for approval.	ers. The numb	per of votes cast for	r the amendment(s)	
☐ The amendment(s) was/were approximust be separately provided for each	ed by the sharehole th voting group ent	ders through v titled to vote si	oting groups. The eparately on the an	following statement nendment(s):	
"The number of votes cast for	the amendment(s)	was/were suff	icient for approval		
by					
	(voting group)			
☐ The amendment(s) was/were adopte action was not required.	d by the board of d	lirectors witho	ut shareholder acti	on and shareholder	
The amendment(s) was/were adopte action was not required.	d by the incorporat	tors without sh	archolder action ar	id shareholder	
7/27/18					
Dated	1	1			
e.	A)		
Signature (By a direc	tor, president or of	her officer = it	directors or office	ers have not been	
	y an incorporator -				
	fiduciary by that fid				
	Alejan (Typed or	dro	Ross;		
	(Typed or p	printed name o	of person signing)		
		WHER	2		
_		(Title of pers	on signing)		