P22 000 027276

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
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Special Instructions to	Filing Officer:	
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FILED
SECRETARY OF STATE
TORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: YOU CARRIER I	NC			
	BER: P22000027276				
	s of Amendment and fee are so	ibmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	HEIDY RODRIGUEZ				
		Name of Contact Persor	1		
	UNION CARRIER SERVICES				
		Firm/ Company			
	5643 NW 74 AVE				
	Address				
	MIAMI, FL 33166				
		City/ State and Zip Code	e		
	UNIONCARRIERSERVICE	S@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, plea		3921035		
Name of Contact Person		at (de & Daytime Telephone Number		
	or the following amount made				
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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YOU CARRIER INC		
(Name of Corporation	n as currently filed with the Flo	orida Dept. of State)
P22000027276		
(Docume	ent Number of Corporation (if kn	own)
Pursuant to the provisions of section 607,1006, Florida 5 ts Articles of Incorporation:	Statutes, this <i>Florida Profit Corp</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:	
		The new
ame must be distinguishable and contain the word "corpline.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbrevi	or "Co". A professional corp	
Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
		
		- ·
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	
. If amending the registered agent and/or registere	d affice address in Florida, ent	or the name of the
new registered agent and/or the new registered of		Creating of the
Name of Marc Davidson Lancon		
Name of New Registered Agent		
	· 	
	(Florida street address)	
New Registered Office Address:		, Florian
	(City)	(Zip Code)
the Desire and America Charles are to be a second		
lew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. To	stered Agent: am familiar with and accept the	obligations of the position.
, , , , , , , , , , , , , , , , , , , ,	. , ,	., .
·		
Signati	ure of New Registered Agent, if c	hanging
Theck if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 60	77.0120 (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)

Example:

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	MGR	_	YOUSNIELL IGLESIAS COLOMBO	21465 SW 112TH AVE #203
X Add				MIAMI. FL 33189
Remove				21465 SW 112TH AVE #203
2) X Change	P	-	ENRIQUE Y COLOMBO FAJARDO	MIAMI , FL 33189
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	09/26/2022	
The date of each amendment(s) acd ate this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing recoartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors witho	ut shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for fireient for approval.	or the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	
"The number of votes east	or the amendment(s) was/were sufficient for approva	ıl
by	(voting group)	_"
	(voting group)	
09/26/2022 Dated		
Signature X &	rector, president or other officer – if directors or office	
selected	rector, president or other officer – if directors or offic , by an incorporator – if in the hands of a receiver, trued and fiduciary by that fiduciary)	
	ENRIQUE Y COLOMBO FAJARDO	
•	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)

. .