Division of Corporations

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(((H19000168049 3)))



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To:

Division of Corporations

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: (850)617-6380

From:

Account Name

: DAKOTA ACCOUNTING SERVICES INC.

Account Number : 120160000034 Phone

: (786)650-1600

Fax Number : (786)650-1601

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Y & M INSTALLERS CORP **DOCUMENT NUMBER:** P19000036519 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LOURDES SARMIENTO Name of Contact Person Y & M INSTALLERS CORP Firm/ Company 1001 SW 128 ST Address MIAMI, FL 33184 City/ State and Zip Code 2020TAXDATA@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; LOURDES SARMIENTO Arca Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, F1, 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

	currently filed with the Florida Dept. of State)
?19000036519· 	
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Status is Articles of Incorporation:	ntes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corpora	ition:
	The new
ame must be distinguishable and contain the word "cor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc ord "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation
s. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	ice address in Florida, enter the name of the
. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	address:
. If amending the registered agent and/or registered office and registered agent and/or the new registered office a Name of New Registered Agent	address:
new registered agent and/or the new registered office a	address:
Name of New Registered Agent	orida street address)
Name of New Registered Agent	orida street address)
Name of New Registered Agent (Fig. 1971)	orida street address) Florida (City) (City)
Name of New Registered Agent New Registered Office Address: New Registered Office Address:	orida street address) (City) (City) Agent:
Name of New Registered Agent (Fig. 1971)	orida street address) (City) Agent:
Name of New Registered Agent New Registered Office Address: New Registered Office Address:	orida street address) (City) Florida (City) Agent:

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 file:

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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	OMAR OTERO	1001 SW 128 AVENUE
X Add			MIAMI, FI. 33184
Remove			
2) Change	<u>T</u>	YANSEL F MESA	1001 SW 128 AVENUE
X Add			MIAMI, FL 33184
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			19 ALL
Remove			- 10 HA
5) Change			
Add			
Remove			<u> </u>
6) Change	•		
Add '			
Remove			

The date of each amendment(s) adoption: date this document was signed.	, if other than th
05/23/2019 Effective date if applicable:	
(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(6) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	سے ہر
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	MA TO
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	IL EI
05/23/2019 Dated	D 8:81
(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)	
LOURDES SARMIENTO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	