P0400052394

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COVER LETTER

TO: Amendment Section "

Division of Corporations					
NAME OF CORPORATION: MYOUNG Installations, INC DOCUMENT NUMBER: PO400052394					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Name of Contact Person Name of Contact Person Name of Contact Person Name of Contact Person Firm/ Company 1346 Mascatta En pire Rd Address City/ State and Zip Code Local Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Michael Jourg at (352) 516-8448 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) □ \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

Articles of Amendment

to
Articles of Incorporation

M Yours Instal	lations lie
(Name of Corporation as current)	y filed with the Florida Dept. of State)
P04000053	2394
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Youra's Installations	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	13410 Mascotte Empire Rd
(Principal office address MUST BE A STREET ADDRESS)	Cura whomat El 34731
	CHONDIANO, 71. 37156
C. Enter new mailing address, if applicable:	121/2 Massella C 22 Pl
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	13410 Mascotte Empire Rd
	Ciroveland +1.34736
	·
D. If amounting the survivariation of survivariation 1 control of the survivariation of	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent Michael F	3 Journ
13110 Mag	10 00 00 00 0 1
(Florida stre	pet address)
New Registered Office Address:	Florida 34736
	(City) (Zip Code)
N. P. I.A. I.A. O. O	
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar w	
	2 1
Winds OR	3
Signature of Man. B	egistered Agent, if changing
Signature of New Ki	egunered regent, 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.

Mike Jones, V as Kema	ove, and Sa	ily Smith, Si	as an Add.			
Example: X Change	PT	John Doe				
X Remove	<u>v</u>	Mike Jone	<u>28</u>			
X Add	<u>sv</u>	Sally Smi	<u>th</u>			
Type of Action (Check One)	Title	1	Name		Address	
1) Change	PYS	Σ _	Michael	B Jourd	13410 Mascotts Cerculand, Fl.	: Empire (
Add					Graveland F)	34736
Remove						
2) Change						
Add						
Remove					*	
3) Change						
Add					<u> </u>	
Remove						
4) Change		<u>-</u>				
Add						
Remove						
5) Change			· · · · · · · · · · · · · · · · · · ·			
Add						
Remove						
6) Change	<u> </u>	<u> </u>				
Add						
Remove						

	adding additional Articl I sheets, if necessary).				
					·
provisions for i	t provides for an excha- implementing the amend icable, indicate N/A)	nge, reclassificatio dment if not contai	n, or cancellation ned in the amendi	of issued shares, nent itself:	
			·····		
					
	· · · ·				

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: Warch 1, 2017	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	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 amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officers 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)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	