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		COVER LETTER	
TO: Amendment Se Division of Cor			,
NAME OF CORPO	DRATION: CY ROJAS INC		
	1BER: P04000056965		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	CARLOS Y ROJAS		
		Name of Contact Person	
	CY ROJAS, INC		
		Firm/ Company	
	315 SW 121ST AVENUE		
		Address	
	MIAMI, FL. 33184		
		City/ State and Zip Code	
	CYROJAS1210@YAHOO.C	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
CARLOS Y ROJAS	5	at (⁷⁸⁶	256-1592 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

CY ROJAS, INC		
(Name of Corporation as currentl	y filed with the Florida Dept. of State)	
P040000056965		
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
NONE APPLICABLE		The new
name must be distinguishable and contain the word "corporation," "Co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contai	on "Corp.," n the word
D. Catan new national office addresse if upplies blar	N/A	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	ress in Florida, enter the name of the	
	_	
Name of New Registered Agent		_
(Florida et	reet address)	-
,	ear tutur essy	
New Registered Office Address:	(City) Florida	Code)
	(-19)	,
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	:: with and accept the obligations of the position.	2021 (1931 -
Signature of New R	Registered Agent, if changing	
Check if applicable		P. T
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), F.S.	N

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: X Change	<u>PT</u>	John Doc		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	V	JUSTO RODRIGUEZ	315 SW 121 AVENUE	
Add			MIAMI, FL 33184	
XX Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
A dd				
_ Remove				

(Attach additional sheets, if necessary	rticles, enter cha). (Be specific)				
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		<u> </u>			
If an amendment provides for an e	vchange, reclass	ification, or ca	ncellation of issi	ied shares,	
provisions for implementing the a	<u>mendment if not</u>	t contained in t	he amendment	itself:	
(if not applicable, indicate N/A)	J				
00% SHARES : CARLOS Y ROJAS	<u> </u>			_	
	. <u></u>				
					
					· -

The date of each amendment(s) ac	MAY 24, 2021	, if other than the
ane date of each amendment(s) at date this document was signed.	option.	
05/2-	4/21	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment f	île datc)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requ partment of State's records.	airements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast fo fficient for approval.	r the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	292
by	(voting group)	2021 JUH-1
05/24/21 Dated		PH 2:
Signature	irector, provident or other officer – if directors or office	
selecte	d, by an incorporator — if in the hands of a receiver, tru ted fiduciary by that fiduciary)	stee, or other court
	CARLOS Y ROJAS	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)