P08000050098

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SECRETARY OF STATICHS
OIVISION OF CORPORATIONS

Mame Ch 8 10 4.24.12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	YMK TOUF CR: P0800005609	RING CO INC	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
ŀ	HARRY M SAML	JELS	
		Name of Contact Persor	1
F	REGISTERED A	GENTS OF SOL	JTH FLORIDA INC
		Firm/ Company	
2	901 STIRLING I	ROAD #307	
		Address	
<u>F</u>	T LAUDERDAL	E, FL 33312	
		City/ State and Zip Code	
HAF	RY@SAMUELS	ACCOUNTING.	COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
HARRY M SA	MUELS	_{at (} 954	966-1350
Name of	Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	rtment of State:
■ \$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)
Amene Division P.O. B	Ing Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flori	da Dept. of State)	_
P08000056098		
(Document Number of Corporation (if kn	own)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
YMK HOSPITALTIES CO INC		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co' word "chartered," "professional association," or the abbreviation "P.A	". A professional corporation name must	bbreviation contain the
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)	,	- 1: OV
		SION C
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	SECRETARY OF STAIR VISION OF CORPORATION 12 APR 24 PH 12: 5
Name of New Registered Agent		STATION OR ATTOM
(Florida street a		o 5
New Registered Office Address: (City)	, Florida(Zip Code)	-
(Chy)	(Lip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.	
Signature of New Registered Agen	nt 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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		<u>. </u>	
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

Ξ.	If amending or adding additional Articles, enter change(s) here: attach additional sheets, if necessary). (Be specific)
	anach daumonai sheeis, ij necessary). (Be specific)
-	
-	
_	
ز	
`.	If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
_	
_	

The date of each amendment(s)	ndoption: JANUARY 1, 201	2
Effective date if applicable:	MEDIATELY	
Enterine dure it apparente.	(no more than 90 days a	fter amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	,
☐ The amendment(s) was/were a by the shareholders was/were:	dopted by the shareholders. The number sufficient for approval.	of votes east for the amendment(s)
	pproved by the shareholders through vot or each voting group entitled to vote sept	
	st for the amendment(s) was/were suffici	ent for approval
. by	(vating group)	·"
The amendment(s) was/were as	dopted by the board of directors without	shareholder action and shareholder
action was not required.		
	dupted by the incorporators without share	cholder action and shareholder
action was not required. Dated APRI	24, 20/2/	
Signature		
select	director, president or other officer - if d ed, by an incorporator - if in the hands on ted fiduciary by that fiduciary)	
	YASMINE M KOTB	_
	(Typed or printed name of	person signing)
	PRESIDENT	
	(Title of person signing)	