## P1100098555

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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## **COVER LETTER**

TO: Amendment Section Division of Corpor			
NAME OF CORPORA	ATION: QYMO	y Porpos	ation
DOCUMENT NUMBI	er: <u>71100</u>	0098555	
The enclosed Articles of	f Amendment and fee are sub	mitted for filing.	
Please return all corresp	condence concerning this matter	er to the following:	
_	Co	Name of Contact Person	PEZ
_			
	Cy	my Corpo	oscition
		Firm/ Company	
	1233	Firm/ Company  3 SW 257  Address	th ST.
_			
	+tom	osteod, F	L 33032
_	-	City/ State and Zip Cod	· ·
: <i>(</i> )n	oria victoria	205 D Va	hoo, com
7 ' 911	arra victoria E-mail address: (to be use	ed for future annual report	notification)
	concerning this matter, please $AOPC2$		
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made pa	ayable to the Florida Depa	artment of State:
S35 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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314  VCras SHOLLY SO SE RU	Amend Division Clifton 2661 F Tallahi Division Value Value	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301
	FINED	다 평범	



January 9, 2018

CARLOS LOPEZ 12823 SW 257TH STREET HOMESTEAD, FL 33032

SUBJECT: CYMY CORPORATION Ref. Number: P11000098555

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 018A00000569



November 1, 2017

CARLOS LOPEZ 12823 SW 257TH STREET HOMESTEAD, FL 33032

SUBJECT: CYMY CORPORATION Ref. Number: P11000098555

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 417A00022120

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment

F11 12 19

	Articles of Incorporation	a		
Cymy	Corporation	: <i>1</i> )	2018 FEB - I	H HA
	poration as currently filed wit	h the Florida Dept. of State	<u>e</u> )	
₽	1100009355	5		
	Document Number of Corporati	on (if known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Pr	ofit Corporation adopts the	following amendme	ent(s) to
A. If amending name, enter the new name o	f the corporation:			
			The new	ı.
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp." "Inc." or "Co". A p.			
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>			<u>.</u>	
			,	
C. Enter now mailing address if applicable			<del></del>	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI				
		<u></u> .		
	·			
D. If amending the registered agent and/or mew registered agent and/or the new registered.		rida, enter the name of the		
	Sterva once was em			
Name of New Registered Agent				
<del></del>	(Florida street address,		<del></del>	
New Registered Office Address:		, Florida		
New Registered Office Address.	(City)		(Zip Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of	ng Registered Agent: agent. I am familiar with and ac	cept the obligations of the p	osition.	

Signature of New Registered Agent, 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	<u>PT</u> Joh	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Maria Victoria Sopedra	12823 SW 257th ST. Homostera, FL 33032
Add		Sopedral	Homostead, FL 33032
× Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
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f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
· · · · · · · · · · · · · · · · · · ·		
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The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this date valocument's effective date on the Department of State's records.	vill 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.	
Dated	
(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)	
Coilos Lopez	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>