## P1300059425

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TALLAHASSEE FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Yama Coffee, Co	mpany	
DOCUMENT NUMBER: P13000059425		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Andreas Reinhardt		
	Name of Contact Per	son
	Firm/ Company	
10254 Winterview Dr		
	Address	
Naples, FL 34109		
<del></del>	City/ State and Zip C	ode
a.reinhardt@re-distribution.com		
E-mail address: (to be u	used for future annual repo	ort notification)
For further information concerning this matter, plea	ase call:	
Andreas Reinhardt	at ( <sup>202</sup>	341 3460
Name of Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida De	epartment of State:
\$35 Filing Fee \$\sum \text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	<ul> <li>         □\$52.50 Filing Fee         Certificate of Status         Certified Copy         (Additional Copy         is enclosed)     </li> </ul>
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ame Divi Clift	et Address endment Section sion of Corporations on Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

<del></del>	on as currently filed with the Florida Dept. of Sta	ie)	·
Yama Coffee, Company			
. (Docum	nent Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the	following amer	ndment(s) to
A. If amending name, enter the new name of the co	erporation:		
Manufactory, Company		The	new
name must be distinguishable and contain the worn "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	" "Inc," or "Co". A professional corporation na	or the abbrevi	ation
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable:	<del></del>		
(Mailing address MAY BE A POST OFFICE BO	<u>x</u> )	<u> </u>	JAK.
		E	
		22	222
		PH	
D. If amending the registered agent and/or register new registered agent and/or the new registered		-	S. S.
	onice address.	: 06	OR I
Name of New Registered Agent			DE A
<del></del>	(Florida street address)	<del></del>	
	(rioriau sireel address)		
New Registered Office Address:	, Florida	(Zip Code)	_
	10/	()	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent:	a a sitia w	
r nereby accept the appointment as registered agent.	i am jamiliar with and accept the obligations of the p	osmon.	
Signe	sture 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>	John Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) Change					
Add					
Remove				55	38
2) Change				H	日本 マママ
Add			<del></del>	22	
Remove				<b>===</b>	트유ic 그 S
3) Change				1: 05	TATE
Add					<b>&gt;</b>
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)		
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		1: 06	95
f an amandment movides for an area	nange, reclassification, or cancellation of issued shares,	6	D P
provisions for implementing the ame	ndment if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
			_
·- ·-			

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Jı	ine 1st 2015	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	13	
	(voting group)	
action was not required.  The amendment(s) was/were a action was not required.  May 15t Dated  Signature  (By a select	adopted by the board of directors without shareholder action and shareholder  adopted by the incorporators without shareholder action and shareholder  a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)  Andreas Reinhardt	SECRETARY OF STATE TALLAHASSEE, FLORIDA  15 MAY 22 PH 1: 06
	(Typed or printed name of person signing)	
	_	
	Treasurer	
	(Title of person signing)	