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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: $\underline{\underline{Y \& M}}$ FLOOR INSTALLATIONS, INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: YEYNEL REYES Name of Contact Person Firm/ Company 2906 11TH ST W Address LEHIGH ACRES FL 33971 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 2594840

Area Code & Daytime Telephone Number YEYNEL REYES Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □S43.75 Filing Fee & ☐\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional conv is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED 17 OCT 30 AM 10: 54

Y & M FLOOR INSTALLATIONS, INC

SEGRETARY OR STATE

(Name of Corporation a	as currently filed with the Florida Dept. of State)
P13000085582	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida States Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s)
4. If amending name, enter the new name of the corpo	oration:
	The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Register	
aereny accept inc appointment as registerea agent. I an	m familiar with and accept the obligations of the position.
Signatur	re 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 Doc 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: - <u>X</u> Change	<u> </u>	John Doc		
X Remove	\underline{V}	Mike Jones		1
X Add	<u>sv</u>	Sally Smith		Ì
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	MILDREY SAAVEDRA	2906 11TH ST W	
X Add			LEHIGH ACRES FL 33971	
Remove				
2) Change				
Add				
Remove				_
3) Change				
Add				
Remove				
4) Change				
Add				-
Remove				
51 Change				
Add			<u></u>	
Remove				
) Change				
Add				
Remove				

f amending or adding additional Artic Much additional sheets, if necessary).	(Be specific)	
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-1		
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
. ,,		
	·	

The date of each amendment(s) as date this document was signed.	loption:	_, if other than the
Effective date i <u>f applicable</u> :		<u></u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will a partment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were addaction was not required.	pted by the incorporators without shareholder action and shareholder	
10/26/2017 Dated		} F †
selecte	A provident or other officer – if directors or officers have not been the bands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	-
	(Typed or printed name of ferson signing)	
	PRESIDENT	1
	(Title of person signing)	