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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: __Yami's Multiservices & Fashion, Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: YAMILYS CARBO Name of Contact Person Yami's Multiservices & Fashion, Inc. Firm/ Company 6700 HANLEY RD Address **TAMPA, FL 33634** City/ State and Zip Code yamismultiservices@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 374-8819

Area Code & Daytime Telephone Number YAMILYS CARBO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

YAMI'S MULTISERVICES & FASHION, INC.

TAMES MOLTISERVICES & PASITION, INC.		
(Name of Corporation	as currently filed with the Florida Dept. of	State)
P14000043064		
(Documer	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopt	s the following amendment(s)
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word	"corporation," "company," or "incorporate	
"Corp.," "Inc.," or Co.," or the designation "Corp,"		name must contain the
word "chartered," "professional association," or the ab	breviation "P.A."	2015
		5 15 E
B. Enter new principal office address, if applicable:		三
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)	क वहन
		<u></u>
		_
C. Enter new malling address if a will address		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		 57
(Mutung dudress MAI BE A POST OFFICE BOX)		<u> </u>
D. If amending the registered agent and/or registered	affice address in Florida, enter the name o	f tha
new registered agent and/or the new registered of		<u>i the</u>
new registered agent mayor the new registered or	1100 111010331	
Name of New Registered Agent		
	(Florida street address)	<u> </u>
New Registered Office Address:		orida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	erod Ament	
I hereby accept the appointment as registered agent. I a		the position
Thereby decept the appointment as registered agent. The	in junitial with and accept the obligations of	ine position.
Signate	ure 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 <math>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.

<u>X</u> Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V Mik</u>	te Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	JOSE A. CORRALES	6700 HANLEY RD
Add			TAMPA, FL 33634
X Remove			
2) Change	P	YAMILYS CARBO	6700 HANLEY RD
X Add			TAMPA, FL 33634
Remove			
3) Change	VP	JOSE M. ALFAYA	6700 HANLEY RD
X Add			TAMPA FL 33634
Remove			
4) Change	***************************************		****
Add			
Remove			
5) Change	 	**************************************	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
, , , , , , , , , , , , , , , , , , , ,	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	noment if not contained in the amendment itsen.
(if not applicable, indicate N/A)	noment if not contained in the amendment itsen.
orovisions for implementing the ame (if not applicable, indicate N/A)	noment if not contained in the amendment user.
provisions for implementing the ame (if not applicable, indicate N/A)	noment if not contained in the amendment user.
(if not applicable, indicate N/A)	noment if not contained in the amendment user.
(if not applicable, indicate N/A)	noment if not contained in the amendment itself.

•	AUGUST 5 2015	
The date of each amendment date this document was signed.		, if other than the
Effective date <u>if applicable</u> :	AUGUST 10, 2015	
Effective date <u>ii applicable.</u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.	nent(s)
	e approved by the shareholders through voting groups. The following st d 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)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and share	sholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and sharehold	er
	UST 5, 2015	
Dated	Los A Corol	
	y a director, president or other officer — if directors or officers have not lected, by an incorporator — if in the hands of a receiver, trustee, or other	
	pointed fiduciary by that fiduciary)	· vouit
	JOSE A CORRALES	
	(Typed or printed name of person signing)	**************************************
	PRESIDENT	
	(Title of person signing)	

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