P14000055330

| (F | Requestor's Name) |
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| (/ | Address) |
| . (4 | Address) |
| (0 | City/State/Zip/Phone #) |
| PICK-UP | MAIL MAIL |
| | Business Entity Name) |
| (1 | Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
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SECRETARY OF STATE OF CORPORATIONS

Amend rame a 5. 6.15

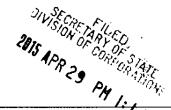
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | KEV | IN K. ROSS, P.A | ۸. | |
|---------------------------------------|---------------------------------|--|--------------------------------|--|
| DOCUMENT NUMBER: | | 00055330 | | |
| The enclosed Articles of Amendme | ent and fee are sui | hmitted for filing | | |
| The chelosed Articles of Amename | m and ice are su | ommed for ming | ,• | |
| Please return all correspondence co | ncerning this mat | tter to the followi | ng: | |
| | | KEVIN K. ROS | SS-ANDIN | Ю |
| | | Name of Cont | tact Person | |
| | | ROSS RIGHTM | 1YER PLL | C |
| | | Firm/ Co | | |
| | 401 CENTE | RPOINTE CIRC | LE, SUITE | E 1525 |
| | | Addre | | |
| | ALTAMON' | ΓE SPRINGS, FI | LORIDA 3 | 2701 |
| | | City/ State and | d Zip Code | |
| | KEVIN | I@ROSSRIGHT | MYER.CO |)M |
| E-mail | address: (to be us | sed for future ann | ual report | notification) |
| For further information concerning | this matter, pleas | se call: | | |
| KEVIN K. ROSS-ANDING |) | at (| 407 | 636-7004 |
| Name of Contact Pe | rson | | | de & Daytime Telephone Number |
| Enclosed is a check for the following | ng amount made j | payable to the Flo | orida Depa | rtment of State: |
| | 5 Filing Fee & ficate of Status | □\$43.75 Filin Certified Co (Additional c enclosed) | ру | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | | | _ | Address |
| Amendment Sect Division of Corp | | | ment Section n of Corporations | |
| P.O. Box 6327 | | | | Building |
| Tallahassee, FL 32314 | | | | xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of KEVIN K. ROSS, P.A.



(Name of Corporation as currently filed with the Florida Dept. of State)

P14000055330

| (Document Number of | f Corporation (if known) | |
|--|---------------------------------------|---------------------|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the | following amendment |
| A. If amending name, enter the new name of the corporation: | | |
| YABUCOA CAPITA | L & CONSULTING GROUP, INC. | The new |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association." or the abbreviation " | Co". A professional corporation na | or the abbreviation |
| B. Enter new principal office address, if applicable: | 6178 HEDGESPARROWS LANE | |
| (Principal office address MUST BE A STREET ADDRESS) | SANFORD, FLORIDA 32771 | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address | | 2 |
| Name of New Registered Agent | | |
| | | |
| (Florida str | eet address) | |
| New Registered Office Address: | , Florida | |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v | | position. |

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 | PT | John Do | <u>oe</u> | |
|----------------------------|--------------|-------------|------------------------|-----------------------|
| X Remove | <u>v</u> | Mike Jo | <u>ones</u> | |
| X Add | <u>sv</u> | Sally Sr | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| X 1) Change | D,VP | | KATINA M. PENLAND-ROSS | 6178 HEDGESPARROWS LN |
| X Add | | | | SANFORD, FL 32771 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|---|
| Amending Article II Purpose: The purpose of this Florida corporation is to provide business consulting services to foriegn |
| and domestic business doing business in the United States. This corporation shall also be permitted to engage in capital |
| management and investment services, hold title to securities, real property and other tangible and intangible assets, and to |
| engage in all manner of business business permitted by law. |
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| F. 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) |
| |
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| |

| • • • | April 24, 2015 | |
|---|--|--------------------------------|
| The date of each amendment(s) a | doption: | , if other than the |
| date this document was signed. | | |
| Effective data if applicable | April 24, 2015 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirements, this | date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes cast for the amendmen ufficient for approval. | t(s) |
| ☐ The amendment(s) was/were ap must be separately provided fo | proved by the shareholders through voting groups. The following stater reach voting group entitled to vote separately on the amendment(s): | nent |
| | t for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were ad action was not required. | opted by the board of directors without shareholder action and sharehol | der |
| ☐ The amendment(s) was/were ad action was not required. | opted by the incorporators without shareholder action and shareholder | |
| | April 24, 2015 | |
| Dated | | |
| Signature | True Kron | |
| | director, president or other officer - If directors or officers have not been | n |
| | ed, by an incorporator – if in the hands of a receiver, trustee, or other co | |
| appoi | nted fiduciary by that fiduciary) | |
| | Kevin K. Ross | |
| | (Typed or printed name of person signing) | |
| | Chairman and Chief Executive Officer | |
| | (Title of person signing) | |