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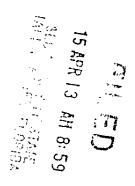
(Re	questor's Name)	
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TO: Amendment Sect Division of Corp			-: <u>.</u> n
	ration: JYS 1		•
DOCUMENT NUM	BER: <u>P15000</u>	028544	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Juon F.	Ram'irez Name of Contact Persor	
		Name of Contact Persor	1
	JYS INV	ESTMENTS	INC
	JYS INVESTMENTS, INC Firm/Company		
	5460 Hoffe	ner Ave# 4	102
	Orlando	FI 32812 City/ State and Zip Code	
		City/ State and Zip Code	2
	Centrodened	POCIOS. IN FO E	2 gmail.com notification)
For further informatio	n concerning this matter, pleas	se call:	
Juan	F. Romirez	at (40 7	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 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)
Ma	iling Address	Street	Address
Ām	endment Section	Amend	lment Section
Division of Corporations		Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circ			
1 617		2001 13	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of In	corporation		
0	f	A. 5	
JYS INVESTMENTS, I	NC		F-1
(Name of Corporation as currently filed with the	Florida Dept. of State)	· · · · · · · · · · · · · · · · · · ·	मः प्रतिम स्र न्यंत्रपे
P15000028544		ω	1000
(Document Number of Corporation (3	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation a	dopts the following amen	dment(s) to
A. If amending name, enter the new name of the corporation:			
NIA		The	new
name must be distinguishable and contain the word "corporati" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpora	orated" or the abbrevia ation name must contain	ition the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(Frincipal office address MOST BE A STREET ADDRESS)			
		<u> </u>	
C. Enter new mailing address, if applicable:	NIA		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		ne of the	
	NIA		
Name of New Registered Agent	NITT	-	
		_	
(Florida s	treet address)		
New Registered Office Address:	, Florida		
(City	r)	(Zip Code)	
N. D. Stand A. S. Standaus & A. S. D. Standaus & A. S. Standaus & A. S. Standaus & S. S. S. Standaus & S. S. S. Standaus & S. S. S. Standaus & S. S. S. Standaus & S. S. Standau			
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		is of the position.	
N	· ·	· •	
Signature of New Registered		-	
5 5	- v		

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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Salty Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			N/A
Add Remove			
2) Change			NIA
Add Remove			
3) Change		_	NIA
Add			
Remove			N/A
4) Change			
Remove			
5) Change			N/A
Add Remove			
6) Change			NIA
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
The purpose for which this corporation is organized is:
organized is:
PRODUCTS DISTRIBUTION AND NETWORK
MARKETING (AMWAY)
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)
N/A

The date of each amendment(s) adoption: 4092015	, if other than the
date this document was signed. Effective date if applicable: 4/09/2015	
(no more than 90 days after amendment file date)	
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 04-09-2015	
Signature	
(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)	
Juan F. Romirez	Adada, danaran
(Typed or printed name of person signing)	
President	
(Title of person signing)	