P15000059396

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COVER LETTER

TO: Amendment Section

Division of Corporations							
NAME OF CORPO	RATION: MY-J2R, INC.						
DOCUMENT NUMBER: P15000059396							
	of Amendment and fee are su	bmitted for filing.					
Please return all corre	spondence concerning this ma	tter to the following:					
	YE, YUE						
	Name of Contact Person						
	Firm/ Company						
	2634 LITTE HILL COVE						
	Address OVIEDO, FL 32765						
		City/ State and Zip Cod	e				
actin	gprose@hotmail.com						
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	n concerning this matter, pleas	se call:					
Yue Ye		at (321	946-1380				
Name of Contact Person		at (321 946-1380 Area Code & 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)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SPORETARY OF STATE DIVISION OF CORPORATIONS

MY-J2R, INC.

15 JUL 27 AM 11: 27

(Name of Corporation as currently filed with the Florida Dept. of State)	
P15000059396	
(Document Number of Corporation (if known)	*
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendments Articles of Incorporation:	ient(s)
A. If amending name, enter the new name of the corporation:	
The ne must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp.," "Inc" or Co" or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	on
3. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
O. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
(City) (Zip Code)	
(Florida street address) New Registered Office Address:	
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.

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	<u>Name</u>	<u>Addres</u> s		
1) Change	DIR	GS GROUP, LLC	2333 Aloha Bay Ct		
Add			Ocoee, FL 34761		
X Remove					
2) Change	DIR	MY-G.S. GROUP, LLC	2333 Aloha Bay Ct		
X Add			Ocoee, FL 34761		
Remove					
3) Change					
Add					
Remove			 		
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

The control of the cost of the	cles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an

The data of each amondment(s) as	July 17, 2015		Filif other, than th
The date of each amendment(s) ac date this document was signed.	option;	SE	BRETARY DE STALL
•	7, 2010	DIVIS	HOLLY SOUND SO KOL
Effective date if applicable:	(no more than 90) days after	amendment file date) 15	JUL 27 AMH: 27
	(in more many budge agree)	amonament fine date,	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutor partment of State's records.	ry filing requirements, this dat	e will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	ì	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of vificient for approval.	votes cast for the amendment(s)
	roved by the shareholders through voting geach voting group entitled to vote separate		nt
"The number of votes cast	for the amendment(s) was/were sufficient f	for approval	
by		."	
•	(voting group)		
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shar	reholder action and shareholde	г
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without sharehol	der action and shareholder	
7/17/2015 Dated	blil		
Signature ' / W	region president or other officer – if direct	tors or officers have not been	
selected	laby an incorporator – if in the hands of a ed fiduciary by that fiduciary)	receiver, trustee, or other court	
	Yue Ye		
	(Typed or printed name of pers	on signing)	
	Director		
	(Title of person sig	ning)	