P15000076788

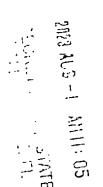
(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: YOSAHIRA COL	EMAN INC		
	BER:			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	MARGARITA GONZALEZ	:		
		Name of Contact Persor	1	
	JMGP MULTISERVICES INC			
		Firm/ Company		
	3181 NW 77TH ST APT 619			
	Address			
	MIAMI FL 33147			
		City/ State and Zip Code	è	
	MARIVAN1331@GMAIL.C	COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call;		
MARGARITA GONZALEZ		at (<u>(305)</u>	469-2498	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check t	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)	☐S52.50 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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

YOSAHIRA COLEMAN INC

(Name of Corporation	as currently filed with the Florida Dept. of State)
P15000076788	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	oration:
N/A	The new
	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word attion "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDR.	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	l office address in Florida, enter the name of the fice address:
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	office address in Florida, enter the name of the
N/A	•
Name of New Registered Agent	
	(Florida street address) 7A 9
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Regist	ered Agent:
I hereby accept the appointment as registered agent. I a	m familiar with and accept the obligations of the position.
Signatu	re of New Registered Agent, if changing

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	MANUEL DE JESUS CHARLES	1080 NW 124TH ST
Add			MIAMI FL 33168
X Remove			
2) Change			
Add			
X Remove Change	S/T	YUDERKY DOMINGA DEL ROSA	1080 NW 124TH ST
Add			MIAMI FL 33168
Remove			<u> </u>
4) Change			2023 AUG
Add			
Remove			
5) Change			
Add			ATE
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
V/A	
•	
. 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)	46
8/A 	
	-

• •	JU1.Y 25,2023	
The date of each amendment(s) add date this document was signed.	ption:	, if other than
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this cartment of State's records.	date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without shareholder ac	tion and shareholder
■ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendmenticient for approval.	ut(s)
• • •	oved by the shareholders through voting groups. The following states ich voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by YOSAHIRA A COLEN	AN	
<u> </u>	(voting group)	
JULY 25,20. Dated	23	
Signature	Jahna Coloman	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other co I fiduciary by that fiduciary)	
 	OSAHIRA A COLEMAN	31 90
	(Typed or printed name of person signing)	
I	RESIDENT	

(Title of person signing)

the

the