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C. GOLDEN

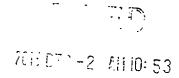
JAN - 9 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GEO & YUS COR		
DOCUMENT NUME	BER:	. <u>.                                   </u>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	GEOVANIS RIVERA		
		Name of Contact Person	1
		Firm/ Company	
	15450 GARDFIELD DR		
	<del></del> -	Address	
	HOMESTEAD FL 33033		
		City/ State and Zip Code	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
GEOVANY RIVERA		786 at (	217-5316
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r 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)
Ame Divi P.O.	Fing Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section in of Corporations entre of Tallahassee 8. Monroe Street, Suite 810 issee, FL 32303

## Articles of Amendment to Articles of Incorporation of



GEO & YUS CORP

(Name o	f Corporation as currently	filed with the Florida Dept. of State)
P16000036548		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this <i>F</i>	Clorida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:	
N/A		The new
	orp," "Inc," or "Co" A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address,		N/A
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A
D. If amending the registered agent an new registered agent and/or the new		
	N/A	
Name of New Registered Agent		
	(Florida stre	et (aaress)
New Registered Office Address:		, Florida
	,	(13)
New Registered Agent's Signature, if cl		
I hereby accept the appointment as registe	ered agent. I am familiar w	ith and accept the obligations of the 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 Doc, 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JAIR F. LOPEZ MENDOZA	16400 SW 304 STREET
Add			HOMESTEAD FL 33033
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			
		Page 2 of 4	
E. If amending or additional she	ng additi ets. if neo	ional Articles, enter change(s) here: cessary). (Be specific)	

- M. 77		
	·	
	<del></del>	
. If an amendment provides for an	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the (if not applicable, indicate N/.	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:	
provisions for implementing the (if not applicable, indicate N/.	amendment if not contained in the amendment itself:	
provisions for implementing the (if not applicable, indicate N/.	amendment if not contained in the amendment itself:	
provisions for implementing the (if not applicable, indicate N/.	amendment if not contained in the amendment itself:	
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provisions for implementing the (if not applicable, indicate N/.	amendment if not contained in the amendment itself:	
provisions for implementing the	amendment if not contained in the amendment itself:	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 (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. 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)

(Typed or printed name of person signing)

GEOVANI RIVERA

(Title of person signing)

PRESIDENT