PMWD4991

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500300119075

06/09/17--01008--011 **35.00

17 JUN -9 PH 4:5

JUN 1 4 2017 S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	ION: L3Y CORPATIO	N INC		
DOCUMENT NUMBER				
The enclosed Articles of A	mendment and fee are so	abmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the following	;:	
YO	VANI MARRERO			
_	·	Name of Contac	t Person	
L3Y	Y CORPATION INC			
		Firm/ Comp	any	
220	5 SW 11 TERRACE			
 -		Address		
MI	AMI, FLORIDA 33135			
 _		City/ State and Z	Lip Code	
For further information cor	E-mail address: (to be us		report no	tification)
YOVANI MARRERO	iooning mis matter, produ			7151301
Name of Contact Person		at (786	rea Code	& Daytime Telephone Number
Enclosed is a check for the	following amount made			•
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copy 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			Clifton Bu	nt Section f Corporations

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Name of Corporation as curre	ently filed with the Florida Dept. of State)
L3Y CORPATION INC PIDOOO 440	191
(Document Numbe	or of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
L3Y CORPORATION INC	The new
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	ACT 7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Manual Manual M	
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addr	
Name of New Registered Agent	
· · · · · · · · · · · · · · · · · · ·	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent:

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove		,		
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	-			
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary)	(Be specific)
the state of the s	
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:

, ,	05/17/2017	
The date of each amendment(s) adop date this document was signed.	tion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements, this tment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendme ient for approval.	ent(s)
	red by the shareholders through voting groups. The following states the voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and shareholder	
05/17/2017		
Dated Signature	Jasoni Hamus	
(By a direct selected, by	tor, president or other officer – if directors or officers have not be y an incorporator – if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary)	
YC	OVANI MARRERO	
	(Typed or printed name of person signing)	
PR	ESIDENT	
	(Title of person signing)	