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TALLAHASSEE FLORIDA

SEP 1 9 2017 S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Y S QUALT	YINC
DOCUMENT NUMBER: P17000062621	
The enclosed Articles of Amendment and fee	 are submitted for filing. 
Please return all correspondence concerning th	is matter to the following:
YOLANDA SOTO	
Y S QUALITY INC	Name of Contact Person
	Firm/ Company
311 ROSLAND DR	
KISSIMMEE, FL 3474	Address
	City/ State and Zip Code
YSQUALITYINC@GMAIL.	 СФМ
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter.	please call:
YOLANDA SOTO	at (407 ) 9609811  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount r	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	n e
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

• •	H	ncorporation of		
Y S QUALITY INC				
(Name	of Corporation as curren	itly filed with the Florida De	ept. of State)	
P17000062621			<del></del> ,	
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006. Florida Statutes, thi	s Florida Profit Corporation	adopts the following	g amendment(s)
A. If amending name, enter the new na	ame of the corporation:			
NONE				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa  B. Enter new principal office address,	nation "Corp," "Inc," or uion," or the abbreviation 	"Co". A professional corp	rporated" or the ab voration name must c	breviation
(Principal office address <u>MUST BE A S</u>	TREET(ADDRESS )			
C. Enter new mailing address, if apple (Mailing address <u>MAY BE A POST</u>		NONE	TALLAHASSEE	FILE SECULATION
D. If amending the registered agent an new registered agent and/or the new			name of the	61 18 18 18 18 18 18 18 18 18 18 18 18 18
Viene and Viene Demission of Lances	NONE			
Name of New Registered Agent				
New Registered Office Address:	NONE (Florida )	street address)	. Florida	
		(City)	(Zip C	ode)
New Registered Agent's Signature, if c	hanging Registered Ager	at:		
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obligati	ions of the position.	
<del></del>		Registered Agent, if changin	lg .	

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V= Vice i Executive Officer; CFO = held. President, Treasure Changes should be noted	and/or D if necess rector title President = Chief F r, Directo in the fol ves the co	irector being ary)  2 by the first le T= Treasure Tinancial Office Towns	added: etter of the office title: et; S= Secretary; D= Director; TR= Tru er. If an officer!director holds more the TD. er. Currently John Doe is listed as the PS tly Smith is named the V and S. These sh	irector being removed and title, name, and ustee: C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is would be noted as John Doe, PT as a Change.
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Naj</u>	ne i	Address
1) Change	PT	YG	LANDA SOTO	311 ROSLAND DR
X Add				KISSIMMEE, FL 34741
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				<del></del>
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				

6) \_\_\_\_ Change

\_\_\_\_ Add

\_\_ Remove

E. If amending or adding additional Articles	enter change(s) here:
(Attach additional sheets, if necessary). (F	specific)
NONE	
	1
F. If an amendment provides for an exchange	reclassification, or cancellation of issued shares,
provisions for implementing the amenda	nent if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NONE	
	<u> </u>

<del>-</del>	
The date of each amendment(s) adoption: date this document was signed.  (09/15/2017	15/2017 , if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) ( <u>CH</u>	ECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendment(s)  pproval.
	   shareholders through voting groups. The following statement 
"The number of votes cast for the amer	  dment(s) was/were sufficient for approval 
by	
(vot	ing group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	 
Dated 9-15-17	
Selected. by an inco	dent or other officer – if directors or officers have not been reporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary	
YOLANDA ———————————————————————————————————	
	Typed or printed name of person signing)
PRESIDEN	TREGISTERED AGENT
	(Title of person signing)
	II