P18000053930

(Re	questor's Name)	
	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: (LYMC) LOMDANY DOCUMENT NUMBER: PLOODO53930
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Luz Marina Carreño Rodriguez Name of Contact Person Ceymar Company Firm/Company 12015 SW 14th Street. Apt # 312C Address Miami, Florida 33184 City/ State and Zip Code Ceymar-4@hot mail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ana Colmenails at 186,661,0003
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) 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				
(6)	umar (ombany	ρ		
(Name of Corpora	ition as currently	filed with the Flor	da Dept. of State)	
Y180000	53930)			
(Doct	ument Number of	Corporation (if know	/n)	<u> </u>	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this F	lorida Profit Corpo	ration adopts the fo	ollowing amendmen	nt(s) to
A. If amending name, enter the new name of the	corporation:				
				The new	
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "C	o". A professional		the abbreviation	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL				<u>u.</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>(OX</u>)			SECTIFIANTS	FILE
D. If amending the registered agent and/or regist	ered office addre	ss in Florida, enter	the name of the	EF. FLORIO	
new registered agent and/or the new registere	d office address:			7	
Name of New Registered Agent		<u>.</u>			
	(Florida stree	t address)		<u>-</u>	
New Registered Office Address:			, Florida		
	(0	Sity)	, 7 101134	(Zip Code)	
New Registered Agent's Signature, if changing Rel hereby accept the appointment as registered agent.		th and accept the ob	ligations of the pos	sition.	
Sig	nature of New Reg	gistered Agent, if cha	unging		

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	$\underline{\mathbf{V}}$	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) X Change	P	Luz Marina (arre de Rodriguez	12015 SW 14th ST
Add		de Kodriguez	Apt # 312C
Remove			Miami, F1 33184
2) X Change	VP	Cesar Ramon Roc	(/ K 🗀)
Add			APT #312 C
Remove			Miami Fl 33181
3) Change		·	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provides for an exch	nange, reclassification	ı, or cancellation	of issued shares.	
orovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contain	ned in the amend	ment itself:	
			-	

The date of each amendment(s) adoption: date this document was signed.		, 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 r document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will no 'State's records.	ot be listed as the
Adoption of Amendment(s) (CI	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.	
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
, hy	ting 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.	incorporators without shareholder action and shareholder	
Dated 06/26/201	8	
Signature Lw HOAL	ie (10)	
	organisher officer – if directors or officers have not been organished a receiver, trustee, or other court	
appointed fiduciary		
	N Marina Contena de Rodrigo (Typed or printed name of person signing)	<u> 182</u>
	President.	
	(Title of person cigning)	