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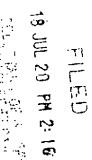


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## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: CLYMAY (OF DOCUMENT NUMBER: P18000539)	npany 30			
The enclosed Articles of Amendment and fee are submitted f	or filing.			
Please return all correspondence concerning this matter to the following:				
Luz Marina Car Ceymar Comp 4520 SW 3	Teno de Rodriguez of Contact Person  Xany irm/ Company  Address  1 23023			
City/ State and Zip Code  Ceymar—4 (a) hotmail. Com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:				
LUZ Marina Carleno	at (305) 215Q517			
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 S43.75 Filing Fee S43.75 Filing Fee Certificate of Status Certificate of Status	75 Filing Fee & S52.50 Filing Fee ified Copy Certificate of Status itional copy is Certified Copy is osed) (Additional Topy 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

Clumar (	omilany		
Name of Corpo	oration as currently filed with the F	orida Dept. of State)	
Y1900005	53930		
(D	ocument Number of Corporation (if ki	nown)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607.1006, FI its Articles of Incorporation:	orida Statutes, this Florida Profit Con	poration adopts the following	amendment(s) to
A. If amending name, enter the new name of the	he corporation:		
Coumar Corporation	$\cap$	7 س	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," or	Corp." "Inc," or "Co". A professio	or "incorporated" or the abb	reviation
B. Enter new principal office address, if applie			
(Principal office address MUST BE A STREET)	ADDRESS )	100 de 100 d 100 de 100 de	<b>18</b>
		ران عور از عور	100
			<u> </u>
C. Enter new mailing address, if applicable:	z now	(A)	- m
(Mailing address MAY BE A POST OFFICE	<u> </u>		· 🕦
		- N-1 N-1	1 0
D. If amending the registered agent and/or reg new registered agent and/or the new registered		ter the name of the	
Name of New Registered Agent			
	•		
	(Florida street address)	*	
New Registered Office Address:		, Florida	
	(City)	(Zip Co	de)
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered age	ent. I am familiar with 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 he first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; 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	ı Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Saliy	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>_P</u>	<u>Luz Marina Carreño de</u>	12015 SW 14th ST.
Add		Rodriguez	ADT # 312C
Remove			Miami, F1 33184
2) X Change	<u>NP</u>	Clear Ramon	12015 SW 14th ST.
Add		rodriguez	HP1#312C
Remove			Miami, Fl 3310
3 ) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change	•		
Add			
Remove			,

ttach additional sheets, if necessary). (Be specific)	•
<del></del>	
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an amendment provides for an exchange, reclassification,	or cancellation of issued shares,
rovisions for implementing the amendment if not containe (if not applicable, indicate N/A)	o in the amendment itself:
(ly not applicable, material to H)	
	4
	<del></del>

The date of each amendment(s) adoption: 071612018	, if other than the
Effective date if applicable: 07/16/2018  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action an I 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)	
LUZ MAÑNA CASSENTO de RODSIGUE (Typed or printed name of person signing)	<u>Z</u>
President.	
(Title of person signing)	