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(Cit	ty/State/Zip/Phone #	r)
PICK-UP	☐ WAIT	MAIL
(0	C. C. No.	
uaj	siness Entity Name	)
(Do	cument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

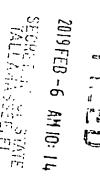
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: CYM (	CONSTRUCTION INC
DOCUMENT NUMBER: P18000089	583
The enclosed Articles of Amendment at	d fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
CARLOS Y ME	NDOZA GODINEZ
	Name of Contact Person
CYM CONSTRU	CTION INC
	Firm/ Company
4587 COCONUT	RD
	Address
LAKE WORTH	FLORIDA 33461
	City/ State and Zip Code
N_SOSA@BELLSOU	TH.NET
E-mail addre	ss: (to be used for future annual report notification)
For further information concerning this	natter, please call:
CARLOS MENDOZA GODINEZ	at (561 ) 6674576
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following an	ount made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Fil Certificate	
Mailing Address  Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

CYM CONSTRUCTION INC (Name of Corporation as currently filed with the Florida Dept. P18000089683 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: CYM REMODELING INC The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A," N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: - I hereby accept the appointment as registered agent. 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 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> </u>	John Doc	
X Remove	Ā	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			<u> </u>
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
//A	
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	· —
If an amandment provides for an eval-	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
/A	

•	02/01/2019	
The date of each amendmen		, if other than
date this document was signed		
Effective date <u>if applicable</u> :	02/01/2019	
Enecuve date <u>ir applicable.</u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dat the Department of State's records.	e will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.	)
	ere approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):	nt .
	es cast for the amendment(s) was/were sufficient for approval	
ьу	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
02/01 Dated	//2019	
Signature _	Carlos Mendoza Godinez	
(I s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	CARLOS MENDOZA GODINEZ	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

the

the