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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: YJJR Investmen	nt Inc.	
DOCUMENT NUM	P20000056063		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Rajendra Bharat		
		Name of Contact Person	1
	YJJR Investment Inc.		
		Firm/ Company	
	9430 SW 18TH STREET		
		Address	
	MIRAMAR, FL 33025		
	-	City/ State and Zip Cod	e
	rajbharat1@att.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call: 954	854 - 7593
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	illing Address nendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

YJJR INVESTMENT INC.

(Name (of Corporation as curre	ntly filed with the Florid	ia Dept. of State)	 _
P20000056063				
	(Document Numbe	r of Corporation (if know	m)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corpor	ation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co".	A professional corpora		reviation "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		
		 		e-3
				E3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
			<u> </u>	<u>ن</u>
D. If amending the registered agent ar			the name of the	
new registered agent and/or the new		<u>ess:</u>		
Name of New Registered Agent	N/A			
	<i>tFlorida</i>	street address)		
New Registered Office Address:	N/A		Florida	·
		(City)	-	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ligations of the po.	sition.
		•		
	Signature of New	Registered Agent, if cha	mging	
Check if applicable				

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chic Executive Officer; CFO = Chicf 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 Doe	
X Remove	<u>V</u>	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) Change	DM	Haine Raghunandan	4340 NW 117 Avenue
X Add			Sunrise, FL 33323
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)
N/A
· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

	adoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendm sufficient for approval.	ent(s)
	approved by the shareholders through voting groups. The following station of each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	. .	
	(voting group)	
Dated	aber 30, 2020 director, president or other officer – if directors or officers have not be	
selec	eted, by an incorporator – if in the hands of a receiver, trustee, or other intended fiduciary by that fiduciary)	
	Rajendra Bharat	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	