3/4/22, 5:21 PM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000840813)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : RC TAX SERVICE LLC

Account Number : I20140000083 : (407)932-0040

Fax Number : (407)520-5473

,**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address

2022 JUN 17

COR AMIND/RESTATE/CORRECT OR O/D RESIGN JOYASOLAR INC

Certifi	cate of Status	0
Certifi	ed Copy	0
Page (Count	06
Estima	ted Charge	\$35.00

J HORNE

NN 20 2022

Electronic Filing Mehu

Corporate Filing Menu

Help

Jhon: Joya 5840 Bovine Dr Saint Cloud, FL 34771 Phone: 407.686.6672

Email: Jhon.joyar@gmail.com

June 9, 2022

DIVISION OF CORPORATIONS FAX NUMBER: 8502456897

AMENDMENT

Application date: 03/04/2022

EIN: 87-3802399

Document Number: P21000100632

The purpose of this letter is to let you know that that the Amendment was sent with its respective payment on 03/04/2022 at 5:21 pm and was not processed. It was sent again on March 28, 2022, and on April 7,2022 and was not processed either. Several calls were also made, and the response was that it was being processed.

Today, Thursday, January 6, 2022, I again request the Division of Corporations Department to transmit my Amendment with the requested date MARCH 4, 2022.

If you have any question, please contact me at phone numbers above.

Sincerely,

Jhon Joya (3uh 9, 2022 15:16 EDT)

Jhon Joya

JUN-17-2022 10:13 From:

	•	COVER LETTER
TO: Amendm Division	ent Section of Corporations	
NAME OF C	ORPORATION: JOYASO	AR INC
DOCUMENT	NUMBER: P21000100632	
The enclosed A	trticles of Amendment and f	ee arc submitted for filing.
Please return a	l correspondence concerning	this matter to the following:
	JHON A JOYA RA	MIRE7.
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person
	JOYASOLAR INC	
		Firm/ Company
	5840 BOVINE DR	
		Address
	SAINT CLOUD, FL	34771
		City/ State and Zip Code
	: jhon.joyar@gmail.co	n
	_ ' '	to be used for future annual report notification)
	· ·	, , , , , , , , , , , , , , , , , , , ,
For further info	mation concerning this matt	er, please call:
JHON A JOY		at (407) 6866672
ì	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a ch	eck for the following amoun	made payable to the Florida Department of State:
■ \$35 Filing I	Fee □\$43.75 Filling I Certificate of S	
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of 2022 HAR -4 PH 12: 32

		01		TALL AHASSEE, FL	••
	(Name of	Corporation as currently	filed with the Florida l	Dept. of State)	 <u></u>
		(Document Number of	Corporation (if known)		
Pursuant to the its Articles of I	provisions of section 607.1(ncorporation:		,	n adopts the following amen	dment(s) to
A. <u>If amendin</u>	g name, enter the new nan	ne of the corporation:			
mc., or co.	istinguishable and contain the "Coi " or the designation "Coi professional association," o	liv. Inc." or "Co". A	ompany," or "incorporation professional corporation	The ed" or the abbreviation "Corn name must contain the w	new p.," vord
B. <u>Enter new</u> (Principal offic	principal office address, if e address <u>MUST BE A STR</u>	ppplicable: EET ADDRESS)			_
C. B.					_ _
	mailing address, if applica dress <u>MAY BE A POST OF</u>				_
D. <u>If am</u> ending	the registered agent and/	or registered office addre	es in Florida enter the	name of the	-
new registe	red agent and/or the new r	egistered office address:	ay man tortida, enter the i	iante or trie	
<u>Name c</u>	of New Registered Agent				
	<u>-</u> -	(Florida street	t address)		
<u>New Re</u>	gistered Office Address:	(C	lity)	_, Florida(Zip Code)	-
lew Registered	Agent's Signature, if char he appointment as registered	ging Registered Agent: l agent. I am familiar with	h and accept the obligati	ons of the position.	
		Signature of New Regi	istered Agent, if changing		
Theck if application	able nuls) is/are being filed pursu				

ľ	
If amending the Officers and/or Directo	s, 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= Tre	asurer; S= Secretary; D= Director: TR= Trustee: C = Chairman or Clark: CFO = Chi-
Executive Officer, Gro - Chief Financial	VINCEY. If an officer/director holds more than one title liet the five latter of such affice hold.
President, Treasurer, Director would be P.	TD.

4045205473

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> <u>John D</u>	pc C	
X Remove	V Mike J	ones	
X Add	<u>SV Sally S</u>	nith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l)Change	VP	OVIDIO F DIAZ PALACIO	13864 TIMBERBROKE DR APT :
Add			ORLANDO, FL 32824
X Remove	<u>e</u>	,	
2)Change			
Add .			
Remove			
Add			
Remove Change	:		
Add			
Remove			
5) Change			
Add			
Add Remove			
6) Change	<u> </u>		
Add			
Remove			

. If amending or adding additional	Articles, enter change(s) here:
(Attach additional sheets, if necessar	y). (Be specific)
<u> </u>	
;	
l'	
-	
If an amendment provides for an ex	xchange, reclassification, or cancellation of issued shares.
provisions for implementing the an	needment if not contained in the amendment itself:
<u> </u>	
<u> </u>	
:	
<u> </u>	
:	
1	I .

The date of each amendment(s) adoption date this document was signed.	;, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block do document's effective date on the Departme	es not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
☐ The amendment(s) was/were approved be must be separately provided for each vo	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes cast for the s	mendment(s) was/were sufficient for approval
by	(voting group)
Dated 03/03/2022 Signature From the Date of the Date	<u> </u>
(By a director, p selected, by an	resident or other officer - if directors or officers have not been neorporator - if in the hands of a receiver, trustee, or other court ary by that fiduciary)
МОНГ	JOYA RAMIREZ
	(Typed or printed name of person signing)
PRESIC	ENT.
	(Title of person signing)