P23000032567



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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Yolanda Rosario Corp DOCUMENT NUMBER: P23000032567 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Yolanda Rosario Name of Contact Person Yolanda Rosario Corp.
Firm/Company 3001 Ansel Ave S Address Lehigh Acres FL 33973 City/ State and Zip Code yrosario12169@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239) 628-6987

Area Code & Daytime Telephone Number Yolanda Rosario Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee

Certified Copy

enclosed)

(Additional copy is

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Certificate of Status

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Yolanda Rosario Corp	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P23000032567	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Yolanda Rosario PA	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	;-
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	vet 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 w	
Signature of New Re	egistered Agent, if changing
Chort if applicable	

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, 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>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Yolanda Rosario	3001 Ansel Ave S
Add			Lehigh Acres Florida 33973
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional s	ling additional Artic heets, if necessary).	(Be specific)				
ed to change Corp b	ecause I cannot use C	orp for my Real I	istate Agent Lice	nse.		
						
						
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If an amendment j	provides for an excha plementing the amen	inge, reclassifica	tion, or cancella	<u>tion of issued sha</u> rendment itself:	ires,	
(if not applica	ble, indicate N/A)	different in flor con	tames in the an	rendment user.		
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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 at	nendment file date)
Note: If the date inserted in this block of document's effective date on the Departm		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted be action was not required.	by the incorporators, or board of direct	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		otes cast for the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each		
"The number of votes cast for the	e amendment(s) was/were sufficient fo	or approval
by	20 m	·``
	(voting group)	
Dated 10/2	1/2024	
Signature Wha	nha Tosano	
(By a director	r, president or other officer - if directo	
	in incorporator – if in the hands of a re luciary by that fiduciary)	eceiver, trustee, or other court
• •	nda Rosario	
-		
	(Typed or printed name of perso	n signing)
P		
	(Title of person signing)	