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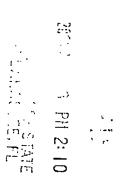
(Requestor's Name)
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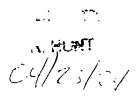
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: YORNELLY SAN	CHEZ PA		
DOCUMENT NUM	IBER: P23000034946			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all cort	respondence concerning this ma	itter to the following:		
	YORNELLY D SANCHEZ	MANRIQUE		
		Name of Contact Person	1	
		Firm/ Company		
	12301 BRACCO STREET			**************************************
	WINTER GARDEN FLORI	Address DA 34787	,	
		City/ State and Zip Cod	e	
	realtoryornelly@gmil.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informat	ion concerning this matter, pleas	se call:		
YORNELLY D SA	NCHEZ MANRIQUE	407 at (	820-1109	
Name	e of Contact Person	Area Co	de & Daytime Telephor	ne Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Statu Certified Copy (Additional Copy is enclosed)	s
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Sui	te 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

YORNELLY SANCHEZ PA

	n as currently filed with the F	lorida Dept. of State)
P23000034946		
(Docume	ent Number of Corporation (if k	(nown)
Pursuant to the provisions of section 607.1006, Florida S Articles of Incorporation:	Statutes, this Florida Profit Con	rporation adopts the following amendmen
A. If amending name, enter the new name of the cor	rporation:	
YORNELLY D. SANCHEZ MANRIQUE PA		The new
ame must be distinguishable and contain the word "cor Inc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbrey.	or "Co". A professional con	
B. Enter new principal office address, if applicable:		.3
Principal office address <u>MUST BE A STREET ADDI</u>	<u>RESS</u> )	
	<del></del>	1
		<del></del>
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u></u>	
		四月二
		m —
	<u> </u>	
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered or</li> </ol>		nter the name of the
Name of New Registered Agent		
		<del></del>
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
iew Registered Agent's Signature, if changing Regis	stered Agent:	
hereby accept the appointment as registered agent. $I$		e obligations of the position.
Signat	ture of New Registered Agent, if	Chanaina
Signai	are of their negistered Agent, if	Changing

 $\Box$  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; CE() = 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 Doc	
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>	Address
1) Change			
Add			
Remove			
2) Change			. #** !:: 
Add			
Remove 3) Change			
Add			FL.
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Remove			

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f an amendment provides for an exchange reclassification or cancellation	n of issued shares
f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amen	n of issued shares, dment itself:
f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amen (if not applicable, indicate N/A)	n of issued shares, dment itself:
provisions for implementing the amendment if not contained in the amen	n of issued shares, dment itself:
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provisions for implementing the amendment if not contained in the amen	n of issued shares, dment itself:
f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amen (if not applicable, indicate N/A)	n of issued shares, dment itself:

, '

The date of each amendment(s) adopt	04/15/2024	if other than the
date this document was signed.		, if other than the
04/15/20 Effective date <u>if applicable</u> :	24	
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block document's effective date on the Departs		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of direc	etors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		rotes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting g a voting group entitled to vote separated	
"The number of votes cast for t	he amendment(s) was/were sufficient fo	or approval
bv	(voting group)	·
	(voting group)	
04/15/2024		
Dated	<u> </u>	:
	() () ()K	
Signature	Lui (in )	Tiv. 22
	or, president or other officer – if directo	
	an incorporator – if in the hands of a reduciary by that fiduciary)	eceiver, trustee, or other court.
YO	RNELLY D SANCHEZ MANRIQUE	
_	(Typed or printed name of perso	on signing)
PRE	ESIDENT	
	(Title of person signing)	<del></del>