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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	P		
DOCUMENT NUMBER:	36		
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Aw	abel C- Aquiyre		
	Name of Contact Person		
	Firm/ Company		
<u>605 N 68</u>	Street, #34		
	Address		
Hialean, 1	2 33014		
	City/ State and Zip Code		
0 1			
<u>Hhabalaguirre</u>	U63@gmail. WM used for future annual report notification)		
is-man address: (to be	used for future annual report notification)		
For further information concerning this matter, pl	ease call:		
Anabel C. Aguirre	at (786) 203-8091		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made	le payable to the Florida Department of State:		
S35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section	Street Address Amendment Section		
Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LYA COVP.			
_	tion as currently filed with the Flo	orida Dept. of State)	-
P23000082036			
(Docu	ument Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	da Statutes, this <i>Florida Profit Corp</i>	oration adopts the follow	ing amendment(s)
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the word "o "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abbi	"," or "Co". A professional corp	rporated" or the abbrevia oration name must cont	tion "Corn "
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET AD	<u>le:</u> <u>DDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Bo</u>	<u>OX</u>)		
			
			
 If amending the registered agent and/or registered new registered agent and/or the new registered 	ered office address in Florida, ente 1 office address:	er the name of the	:
Name of New Registered Agent			<u> </u>
			- -,
	(Florida street address)		- :
New Registered Office Address:		, Florida	-
	(City)		(Code)
lew Registered Agent's Signature, if changing Re- hereby accept the appointment as registered agent.	gistered Agent: Lam familiar with and account the	Alientians of the position	
. , , , , , , , , , , , , , , , , , , ,	- tom juminia mini una accept me n	ongunous of the position.	

Signature of New Registered Agent, if changing

Check 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	PT	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	<u>P</u>	Anabel C. Aguire	LODS WEST LOS STreet
<u>X</u> Add			#34
Remove			Hialean, FC 33014
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change		<u> </u>	
Add			
Remove			

xuacii <i>aaanional s</i>	sheets, if necessary)	. (Be specific)				
	<u>_</u>					
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rovisions for im	provides for an exc plementing the am	<u>nange, reclassific</u>	ation, or cancel	tation of issued	shares,	
(if not applica	ble, indicate N/A)	endinent ii not co	ntained in the a	intenument itse	<u>III:</u>	
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<u>. </u>				 _		
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The date of each amendment(s) adoption: 8, 2024 if other than the date this document was signed.
Effective date if applicable: January 8, 2024 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Dated
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Anabel C. Agrivve (Typed or printed name of person signing)
(Title of person signing)