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2021/HAY 21 AM 4: 3 SECRETARY OF SIMI

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORROL	RATION: <u>JY Per</u>	ez In		
DOCUMENT NUM	D740000341810	.0 2 , 1710		_
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	spondence concerning this ma	atter to the following:		
	Н	ECTOR LUIS PEREZ PEF	REZ	
		Name of Contact Perso	n	
		JY Perez	Inc	
		Firm/ Company		
		809 LAUREL ST		
		Address		
		MASCOTTE, FL 3475	53	<i>ب</i> ،
•		City/ State and Zip Cod	le	BEEC SEC
		hec.perez1223@gmail.co	om	后 支
•	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		METHRY 21 M 1: 39 SECRETARY OF STATI
HECTOR LI	UIS PEREZ PEREZ	at (418-9902	*71
Name o	of Contact Person	Area Co	de & Daytime Telephone N	umber
Enclosed is a check for	the following amount made	payable to the Florida Depa	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 Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

JY PEREZ. INC.

	JI I DREZ, INC.			
(Name of	Corporation as currently filed with the Flor	ida Dept. of State)	<u> </u>	
	P24000024188			
	(Document Number of Corporation (if know	wn)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corpo	ration adopts the fe	ollowing ameno	lment(s) to
A. If amending name, enter the new name	me of the corporation:			
			The 1	lew
	the word "corporation," "company," or "incorporp," "Inc," or "Co". A professional corpo or the abbreviation "P.A."		reviation "Corp)., ''
B. Enter new principal office address, it				_
(Principal office address <u>MUST BE A ST</u>	<u>REET ADDRESS</u>)			
				_
				- ;
C. Enter new mailing address, if applic	able:			
(Mailing address MAY BE A POST O	OFFICE BOX)			_
				
				_
	1/or registered office address in Florida, enter	r the name of the	S 25	
new registered agent and/or the new			12EC	estate hern
Name of New Registered Agent	HECTOR LUIS PEREZ PEREZ		<u> </u>	1 9
	809 LAUREL ST		72 743 743 743 743	4
-	(Florida street address)		<u> </u>	• •
New Registered Office Address:	MASCOTTE	. Florida	34753	11.00 mg
New Registered Office Padaress.	(City)	, 1 1011da	(Zip,Code)	
			, . ,	
New Registered Agent's Signature, if ch	anoine Registered Agent			
I hereby accept the appointment as registe	red agent. I am familiar with and accept the o	bligations of the po	sition.	
	,			
	11 11 12			
	Signature of New Registered Agent, if ch			
	Signature of New Registered Agent, if ch	anging		
Check if applicable				
☐ The amendment(s) is/are being filed pu	rsuant 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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	P	HECTOR PEREZ	809 LAUREL ST	
Add			MASCOTTE	
X Remove			FL 34753	
2) Change	P	HECTOR LUIS PEREZ PEREZ	809 LAUREL ST	
X Add			MASCOTTE G	4 2 27
Remove 3) Change			MASCOTTE CORPORATION OF THE PROPERTY OF THE PR	
Add			02	. 45
Remove			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	\ . 4 12
4) Change		_	39 FLE	
Add				
Remove			·	
5) Change				
Add				
Remove				
6) Change				
Add			·	
Remove				

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)			
			
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	/ <u>i.</u>)3S	2024 HAY	
(if not applicable, indicate N/A)	ECRE	<u>ــــــــــــــــــــــــــــــــــــ</u>	· •
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	ASSEE, S	Mt 4: 39	
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	<u>, </u>	39	

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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)
Note: If the date inserted in this I document's effective date on the D	plock does not meet the applicable statutory filing requirement epartment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amufficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
selecte	bright fiduciary by that fiduciary)	
	Hector Luis Perez Perez	
	(Typed or printed name of person signing)	024 I
	President	
	(Title of person signing)	RY CF SIME