## P03000123902

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(-1,-2,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
, v

Office Use Only



600428167716

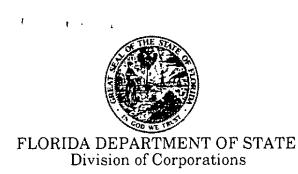
Oppertie date 5-1-24

04/23/24--01010--004 \*\*35.00

FILED 2024 APR 23 PH 12 32

A. RAMSEY MAY 30, 2024

400789,00524.00671



May 9, 2024

JOSHUA YODER YODER SEPTIC SERVICE INC 15646 SE ABE SPRINGS/BULLHEAD BAY RD BLOUNTSTOWN, FL 32424

SUBJECT: YODER SEPTIC SERVICE, INC.

Ref. Number: P03000123902

We have received your document for YODER SEPTIC SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Is the effective date supposed to be May 1? The date of adoption can't be after the date the document was mailed but May 1 can be the effective date. Please put May 1 on the effective date line.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 524A00010224

Annette Ramsey OPS

www.sunbiz.org

## **COVER LETTER**

the state of the s

		COVER LETTER				
TO: Amendment Sec Division of Corp		•				
NAME OF CORPO	RATION: YODER SEPTIC	SERVICE, INC.	•			
DOCUMENT NUM	P03000123902					
	of Amendment and fee are su	bmitted for filing.				
	espondence concerning this ma	-				
	•					
	JOSHUA YODER					
	Name of Contact Person YODER SEPTIC SERVICE INC					
	Firm/ Company					
	15646 SE ABE SPRINGS/E					
	· · · · · · · · · · · · · · · · · · ·	Address	<del></del>			
	BLOUNTSTOWN, FL 3242	4				
		City/ State and Zip Code	e			
	E-mail address: (to be used for future annual report notification)					
For further information	on concerning this matter, plea	se call:				
JOSHUA YODER		at (	674-2716			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	□\$43.75 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 Tallahassee, FL 32314		Amend Division The Co 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

FILED

2024 APR 23 PM 12 32

YODER SEPTIC SERVICE, INC.

A State of the sta

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation as currently	y filed with the Florida Dept. of State)
P03000123902	• • •
(Document Number of	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:	
ame 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."	professional corporation name must contain the word
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )	
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
. 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	<del></del>
(Florida stre	eet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
	(City) (Zip Code)
Signature of New Re	egistered Agent, if changing

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)

Example:

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.

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)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	D	WESTON YODER	₹	15646 SW ABE SPRINGS/BULL-
X Add				HEAD BAY ROAD
Remove				BLOUNTSTOWN, FL 32424
2) Change				
Add				<u> </u>
Remove 3) Change		-		
Add				
Remove				
4) Change		<u> </u>	<del></del>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)		
<del> </del>	<u> </u>		
	<del> </del>		
<del></del>			
	<u> </u>		
<del></del>			
	<del></del>	<del></del>	
-			
		llation of issued shares,	
f an amendment provides for an excl	<u>ange, reclassification, or cance</u>		
provisions for implementing the ame	ange, reclassification, or cance adment if not contained in the	amendment itself:	
f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cance adment if not contained in the	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance ndment if not contained in the	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
provisions for implementing the ame	ange, reclassification, or cance	amendment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cance	amendment itself:	

And the second second

MAY 1, 2024 The date of each amendment(s) adoption: \_\_\_\_, if other than the date this document was signed. Effective date if applicable: 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 \_\_ (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) JOSHUA YODER (Typed or printed name of person signing) PRESIDENT

(Title of person signing)