P06000033339

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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JAYO7 2019

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ____Yorkie Enterprises, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tamara York Name of Contact Person Yorkie Enterprise, Inc. Firm/ Company 2130 SE 62nd Street Address Ocala, FL 34480 City/ State and Zip Code Tamara@SellOcalaRealEstate.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tamara York Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee **□\$43.75** Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Yorkie Enterprises, Inc.		- KUE :	, 's.'
(Name o	f Corporation as currently filed with the Florida Dept. of State)	700	0 —
Yorkie Enterprises, Inc.	P06000033339	200	U:
	(Document Number of Corporation (if known)	- 17	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the follow	ving amendme	nt(s) to
A. If amending name, enter the new na	me of the corporation:		
Tamara York P.A.		The new	ı
	ain the word "corporation," "company," or "incorporated" or the ution "Corp," "Inc," or "Co". A professional corporation name mution," or the abbreviation "P.A."		
B. Enter new principal office address, i (Principal office address MUST BE A ST			
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
D. If amending the registered agent and new registered agent and/or the new	d/or registered office address in Florida, enter the name of the registered office address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	, Florida		
	(City)	ip Code)	
_			
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agent: ered agent. I am familiar with and accept the obligations of the position	n.	
	Signature of New Registered 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)

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 <math>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 Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_	· · · · · · · · · · · · · · · · · · ·		
Add					·
Remove					
2) Change		_			
Add					
Remove					
3) Change		·-•			
Add					
Remove					
4) Change		_		-	
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		-		-	
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
specific business purpose 15	
Specific business purpose 1s Real Estate Sales. I am a ficinsed Real Estate	
I am a licensed Real Estate	
agenti	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	_

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
mappineane.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendufficient for approval.	lment(s)
	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	reholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and sharehol	der
11/30/201	8	
Dated Signature	Tollan Chrift	
(By a c	lirector, president of other officer fif directors or officers have no	been
	ed, by an incorporator – if in the hands of a receiver, trustee, or oth ited fiduciary by that fiduciary)	er court
	Tamara York	
	(Typed or printed name of person signing)	<u>.</u>
	President, Vice President	
	(Title of person signing)	