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SECULIAL OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: YELLOWFIN, INC	C.			
DOCUMENT NUM	MBER: P06000113871		· · · ·		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	Frank Begalke				
		Name of Contact Person	n		
	YELLOWFIN, INC.				
		Firm/ Company			
	95 Spartina Circle				
	••	Address			
	Santa Rosa Beach, FL 32459				
		City/ State and Zip Cod	c		
	fbegalke@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se call:		IVI UOBS	2023 HAY 22
Frank Begalke		at (⁶⁰²	999-8608	17. T	AY :
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number	一方式	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	TETA KY OF SY LLAHANSEE, I 	PM 12: 52
□ \$35 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)	FL	: 52
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Division The C 2415	Address Imment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

YELLOWFIN, INC.			
(Name o	f Corporation as curre	ently filed with the Florida Dept. of State)	····-
P06000113871			
	(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	nis Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
	orp," "Inc," or "Co".	"company," or "incorporated" or the abbrevious A professional corporation name must con A."	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (95 Spartina Circle	SECKET
		Santa Rosa Beach, FL 32459	
D. If amending the registered agent an new registered agent and/or the new		ddress in Florida, enter the name of the ess:	CIT STAT SEE, FL
Name of New Registered Agent	Frank Begalke		TE Z
	95 Spartina Circle		
	(Florida	street address)	
New Registered Office Address:	Santa Rosa Beach	, Florida 32459)
		(City) (Z.	ip Code)

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)

Remove

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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PST	John B Farmer	285 WILDERNESS WAY
Add			Santa Rosa Beach, FL 32459
X Remove			
2) Change	PST	Frank Begalke	95 Spartina Circle
X Add			Santa Rosa Beach, FL 32459
Remove 3) Change			
Add			
Remove			——————————————————————————————————————
4) Change			
Add			
Remove			
5) Change		1-411	•
Add			
Remove			
6) Change			
Add			

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	05/19/2023	
The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
05	/19/2023	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	ı
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	u
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
Dated5	John Jam, PST	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	John B Farmer	
	(Typed or printed name of person signing)	
	PST	
	(Title of person signing)	

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