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COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: Talmer		
DOCUMENT NUMBER: 714 0000) + 2 2 1 1	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Katherine	Name of Contact Person	
K	Firm/ Company	
	Firm/ Company	
206 Lake	Firm/Company 6, bson Lane	
	Address	
Lakeland.	A 33809	
	City/ State and Zip Code	
Darbiz 5305 E-mail address: (to be u	used for future annual report notification)	
For further information concerning this matter, plea	ase call:	
Pamele MEEKS Name of Contact Person	at (813) 335-3620 Area Code & Daytime Telephone Number	
	, ,	
Enclosed is a check for the following amount made	payable to the Florida Department of State:	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations	
Taliahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

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	Amendment
·	oncorporation
	र है
	YEET LIQUOS, Inc
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
41400072	211
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, cuter the new name of the corporation:	A The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	206 Lake 9165 on Lane Lakeland FZ 33809
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	206 Lake Gibson Lane Lakeland FC 33809
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida	xtruet address)
N D 3	/A Bloods
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt:
l hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
11/2	
Signature of New	Registered Agent, if changing
ingrature of them	Tregulation of Tregular, if Charles and

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 D	o oe	
X Remove	V Mike J	<u>ones</u>	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>D</u>	Knauer, gina	3420 W. North A St. Tanpa FC 33609
Add Remove			1anpa PC 33609
2) Change	PID	DErosa, Katherine	103 N. Palmer St. Plant City, FC 33511
Remove 3) Change Add	VS	HAILEY, DEANNA	103 N Palmer St. Plant City Fr 335/1
Remove 4) Change Add			
Remove			
5) Change Add			
Remove 6) Change			
Add			
Damaria			

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rovisions for implementing th	ne amendment if r	nssification, or ca not contained in t	ncellation of issued s he amendment itself	hares,
an amendment provides for a rovisions for implementing the (if not applicable, indicate N	ne amendment if r	nssification, or ca not contained in t	ncellation of issued s the amendment itself	hares, L
rovisions for implementing th	ne amendment if r	nssification, or can	ncellation of issued s he amendment itself	hares,
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an amendment provides for a provisions for implementing th (if not applicable, indicate N	ne amendment if r	nssification, or can	ncellation of issued s	hares,

The date of each amendment(s) adoption:	<u>R</u>	5/19/2015	, if other than the		
date this document was signed.	75/	19/2015			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)				
Note: If the date inserted in this block does not document's effective date on the Department of St		utory filing requirements, this date	will not be listed as the		
Adoption of Amendment(s) (CHE)	CK ONE)				
The amendment(s) was/were adopted by the shappy by the shareholders was/were sufficient for app		of votes cast for the amendment(s)			
☐ The amendment(s) was/were approved by the s must be separately provided for each voting gr			!		
"The number of votes cast for the amendr	ment(s) was/were sufficient	nt for approval			
by(voting		.,,			
(voting	g group)				
☐ The amendment(s) was/were adopted by the bo action was not required.	ard of directors without s	hareholder action and shareholder			
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without share	holder action and shareholder			
Dated $\frac{5}{30}$					
1)	()				
Signature / By a director, preside	ont on other officer - if di	rectors or officers have not been			
		f a receiver, trustee, or other court			
appointed fiduciary by	y that fiduciary)				
	EANNA H	Ailry			
(Ty	yped or printed name of p	erson signing)			
	PS				
	(Title of person	signing)			