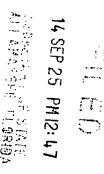
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| (Re | equestor's Name) | | |
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| (Address) | | | |
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| (Ad | dress) | | |
| | | | |
| (Cit | ty/State/Zip/Phone | e #) | |
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| PICK-UP | WAIT | MAIL | |
| | | | |
| (Bu | siness Entity Nar | ne) | |
| | | | |
| (Do | cument Number) | | |
| | | | |
| Certified Copies | Certificates | s of Status | |
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| | | | |
| Special Instructions to | Filing Officer: | | |
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Office Use Only

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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| _{subject:} Yell | owhammer Man | agement, Inc. | |
|--------------------------|--|--|---|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the art | ticles of incorporation and | d a check for: |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| FROM: A | nthony J. Morga | n | |
| | Nam | e (Printed or typed) | |
| 2 | Portofino Drive, | Apt. 607 | |
| | | Address | |
| Pe | ensacola Beach, | Florida 3256 | 1 |
| 60 |)1-520-3984 | State & Zip | |

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

teammorgan3@gmail.com

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ricle i Na name of the corpo | AME ration shall be: Yellowhammer Ma | nagemen | t, Inc. |
|--|--|--|---|
| | RINCIPAL OFFICE | | D.C. |
| Portofina F | Principal <u>street</u> address Prive, Apt. 607 | | Mailing address, if different is: |
| | | | <u> </u> |
| insacola E | each, Florida 32561 | | 1927 1977 |
| purpose for which | RPOSE In the corporation is organized is: to provide er legal business operation. | manageme | nt and administrative serv |
| | | | |
| TICLE V IN | MARES 1,000 MITIAL OFFICERS AND/OR DIRECTOR tie: Anthony J. Morgan 2 Portofino Drive, Apt. 607 | Name and Title | David P. Parker |
| number of shares | nt stock is: 1,000 TITIAL OFFICERS AND/OR DIRECTOR tle: Anthony J. Morgan | | |
| TICLE V IN | TITIAL OFFICERS AND/OR DIRECTOR tle: Anthony J. Morgan 2 Portofino Drive, Apt. 607 | Name and Title | 1363 W. Co. Hwy. 3 |
| PICLE V IN Name and Ti Address | TITIAL OFFICERS AND/OR DIRECTOR tle: Anthony J. Morgan 2 Portofino Drive, Apt. 607 Pensacola Beach, FL 32561 | Name and Title Address: | Unit 3112 Santa Rosa Beach, FL 32 |
| PICLE V IN Name and Ti Address | TITIAL OFFICERS AND/OR DIRECTOR tle: Anthony J. Morgan 2 Portofino Drive, Apt. 607 Pensacola Beach, FL 32561 | Name and Title Address: | 1363 W. Co. Hwy. 3 Unit 3112 |
| Name and Tit | TTIAL OFFICERS AND/OR DIRECTOR tle: Anthony J. Morgan 2 Portofino Drive, Apt. 607 Pensacola Beach, FL 32561 le: Darren Martin | Name and Title Address: Name and Title | 1363 W. Co. Hwy. 3 Unit 3112 Santa Rosa Beach, FL 32 Anthony Ricciardon |
| Name and Tit | TITIAL OFFICERS AND/OR DIRECTOR 1 | Name and Title Address: Name and Title | 1363 W. Co. Hwy. 3 Unit 3112 Santa Rosa Beach, FL 32 Anthony Ricciardon 251 Oxmoor Place |
| Name and Tit Address Name and Tit Address | TITIAL OFFICERS AND/OR DIRECTOR atle: Anthony J. Morgan 2 Portofino Drive, Apt. 607 Pensacola Beach, FL 32561 Darren Martin 1110 Santa Rosa Blvd. Unit A 308 | Name and Title Address: Name and Title Address: | 1363 W. Co. Hwy. 3 Unit 3112 Santa Rosa Beach, FL 32 Anthony Ricciardon 251 Oxmoor Place Birmingham, AL 352 |

| Name ar | nd Title: | Name and Title: | |
|--------------------------------------|--|--|--|
| Address | s | Address: | |
| | | | |
| | | | |
| ARTICLE VI | REGISTERED AGENT | | ger . |
| The name and F | lorida street address (P.O. Box NOT acceptable) of | the registered agent is: | T |
| Name: | Anthony J. Morgan | | SEP SEP |
| Address: | 2 Portofino Drive, Apt. 607 | | 25 |
| | Pensacola Beach, FL 32561 | | PK 12: 47 |
| ARTICLE VII | INCORPORATOR | | 0.22 L7 |
| The name and a | ddress of the Incorporator is: | | |
| Name: | _Anthony J. Morgan | | |
| Address: 2 I | 2 Portofino Drive, Apt. 607 | | |
| | Pensacola Beach, FL 32561 | | |
| Having been nathis certificate, I | med as registered agent to accept service of process am familiar with and accept the appointment as regi | istered agent and agree to act in t | at the place designated in this capacity $9/23/14$ |
| | Required Signature/Registered Agent | | / Date / |
| I submit this doc document to the | cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony | rue. I am aware that the false in as provided for in s.817.155, F.: | nformation submitted in a S. |
| | Required Signature/Incorporator | | 9/23/14 Date |