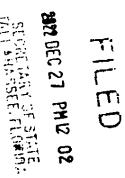
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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A. RAMSEY MAR 08 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Gravity Dog I	Productions, Inc.	
DOCUMENT NUMBER:	P160000377	49	
The enclosed Articles of Amenda	nent and fee are so	bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
		Nicholas Solorzano	
		Name of Contact Person	1
		Firm/ Company	
	;	302 Arthur Moore Dr	ive
***		Address	
	Gree	en Cove Springs, FL	32043
		City/ State and Zip Code	2
	ni	ck.solorzano@gmail.	com
E-ma	l address: (to be us	sed for future annual report	notification)
For further information concernit	ig this matter, pleas	se call:	
Nicholas Solo	rzano	at (904	806-4792 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made	payable to the Florida Depa	artment of State:
-	.75 Filing Fee & ifficate 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 Addre Amendment Sc Division of Co P.O. Box 6327 Tallahassee, FL	ction porations	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Gravity Dog Productions, Inc.	n as currently filed with the Florida Dept. of State)
(Name of Corporation	n as currently filed with the Florida Dept. of State) 2
P16(RRX)37749	CALLAHASSEE ESTALE
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:
YELLING, INC.	The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: Tam familiar with and accept the obligations of the position.
Signa	ture 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)

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 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)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	-	_		
Remove				

tach additional sheets, if neces	sary). (Be specific	:)	t amenging or auging augitional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)		
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an amendment provides for	an evehange reclas	sification or cance	llation of issued sha	res.	
rovisions for implementing t	<u>he amendment if no</u>	ot contained in the	amendment itself:		
(if not applicable, indicate	N/A)				
		•			
<u> </u>	118.0				
	_	•			
			· · · · · · · · · · · · · · · · · · ·		

date this document was signed.	
Effective date if applicable:	January 1, 2023
	January 1, 2023 (no more than 90 days after amendment file date)
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as to partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
must be separately provided for e	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): For the amendment(s) was/were sufficient for approval
	··
<u> </u>	tvoting group)
Signature(By a dit selected	fick Solorzano rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
•	Nicholas Solorzano
	(Typed or printed name of person signing)
	Owner President