## P17000073632

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(======================================
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





800375392388

10/22/21--01033--004 \*\*35.00

SECRETARY OF STATE

DEC 1 3 2021 S. PRATHER



2021 "5" 30 1" 10:41

## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2021

MATTHEW SETH SARELSON, ESQ 2100 PONCE DE LEON, SUITE 1290 CORAL GABLES, FL 33134

SUBJECT: YEL INVEST, INC. Ref. Number: P17000073632

- I am resording

clarges Tee att a.

Thank you.

We have received your document for YEL INVEST, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacy Prather Regulatory Specialist III

Letter Number: 621A00026707

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: YEL Invest, Inc.						
DOCUMENT NUMBER: P170000073632							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all corresp	ondence concerning this mat	eter to the following:					
Ŋ	Jatthew Sarelson, Esq.						
<del>-</del>	Name of Contact Person						
D	Dhillon Law Group, Inc.						
_	Firm/ Company						
2	100 Ponce de Leon, Suite 12	90					
_	Address						
C	Coral Gables, Fl 33146						
_		City/ State and Zip Code					
n	msarelson@dhillonlaw.com						
_	E-mail address: (to be us	ed for future annual report	notification)				
	concerning this matter, pleas		770 1070				
Matthew Sarelson	_	at (	_)				
Name of	Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State;				
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Amer Divisi P.O. I	ng Address Idment Section Idment Sec	Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303				

## Articles of Amendment to Articles of Incorporation of

the Florida Dept. of State)  The new or "incorporated" or the abbreviation "Corp., and corporation name must contain the word of the Street  29  ork, NY 10028		
The new or "incorporation name must contain the word of the Street 129  ork, NY 10028		
The new or "incorporation name must contain the word of the Street 129  ork, NY 10028		
The new or "incorporated" or the abbreviation "Corp., and corporation name must contain the word (6th Street)  29  ork, NY 10028		
or "incorporated" or the abbreviation "Corp., and corporation name must contain the word 6th Street 29 ork, NY 10028		
or "incorporated" or the abbreviation "Corp., and corporation name must contain the word 6th Street 29 ork, NY 10028		
nal corporation name must contain the word 6th Street 29 ork, NY 10028		
29 ork, NY 10028 Soth Street		
ork, NY 10028 Soth Street		
66th Street		
Office 429		
ork, NY 10028		
rida, enter the name of the		
, Florida		
<u>i</u>		

☐ 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>	<u>John Doe</u>			
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>SV</u>	Sally Smith	<u>1</u>		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	ame		Address
1) Change	DPST	Y	ann Dupre		12424 WILSHIRE BLVD #900
Add					LOS ANGELES, CA 90025
X Remove					
2) Change	Đ	Ja;	ye Management LLC		157 E. 86th Street
XXAdd					Office 429
Remove 3 ) Change					New York, NY 10028
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove				,	
6) Change					
Add					
Remove					

(At	imending or adding additional Articles, enter change(s) here: (ach additional sheets, if necessary). (Be specific)
_	
	<del></del>
lf:	in amendment provides for an exchange, reclassification, or cancellation of issued shares,
р	ovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
_	

•

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
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 meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	on and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):  "The number of votes cast for the amendment(s) was/were sufficient for approval	
· · · · · · · · · · · · · · · · · · ·	至る
by	FILED OV 30 PI HASSEE,
Dated11/25/2021	FILED 2021 NOV 30 PM 2: 13 SHURETARY OF STATE SHURETARY OF FLORID
Signature	——————————————————————————————————————
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed tiduciary by that fiduciary)	ı
Yann Dupre	
(Typed or printed name of person signing)	
Manager of Jaye Management, LLC	

(Title of person signing)