P19000037401

(Requestor's Name)
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,
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION:	PRODUCTIONS, CORP				
DOCUMENT NUM	IBER: P19000037401					
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	FRANCY RODRIGUEZ					
		Name of Contact Perso	1			
	ATC PROFESSIONAL SERVICES, INC					
		Firm/ Company				
	3645 WEST 16TH AVENU	ie.				
		Address				
	HIALEAH, FL 33012					
		City/ State and Zip Cod	0			
f.ı	odriguez.atc@hotmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
FRANCY RODRIGUEZ		at (440-1932			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	rtment of State:			
S35 Filling Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of

YOLO DIGITAL PRODUCTIONS, CORP.

D. 400000 = 101	tly filed with the Florida				
P19000037401					
(Document Number of	of Corporation (if known)				
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporati	on adopts the	follow	ing am	endment(s
. If amending name, enter the new name of the corporation:					
				T	
ime must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or to ord "chartered," "professional association," or the abbreviation	"Co". A professional co	corporated" or corporation name	or the ne mus	abbres	new viation in the
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)					
			1:55		
			- 2 2	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				5	
(maning address MAT BL ATOST OF TICE BOA)				J	in.
			- :: 	<u> </u>	=======================================
			33	ب _ <u>ى،</u> _	
If amending the registered agent and/or registered office add	ress in Florida, enter the	name of the	<u> </u>	2	
new registered agent and/or the new registered office address	<u>s:</u>				
Name of New Registered Agent					
Marke of their Registered tigens					
- And by New Neglate/ear. 1gent					
	reet address)		-	_	
	reet address)	, Florida		<u> </u>	

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 Doc	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	BROIANIGO, FLAVIO GUY	14127 SANCTUARY
X Add			TERRACE LANE APT 104
Remove			ORLANDO, FL 32832
2) Change			
Add			——————————————————————————————————————
Remove			25. SE
3) Change			
Add			- TO
Remove			10: 32
4) Change			
Add			-
Remove			
5) Change			
Add			
Remove		·	
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an excha	inge, reclassification, or cancellation of issued shares,)2= 		
provisions for implementing the amen-	dment if not contained in the amendment itself:			
(if not applicable, indicate N/4)	•			
				—
				_
				_

date this document was signed.	, if other than the
Effective date if applicable:	
(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 date we document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder—action was not required.	<u> </u>
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	SEP 2
Dated 09/25/2019	ILED 27 ANIO:
Signature	0.3
(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 fiduciary by that fiduciary)	
ARNAUDO GIORGIO LUIS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	