PPACOCO TALO9

(Re	equestor's Name)	
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Amuend

CARRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: YELLOW USA CO	ORP.	
DOCUMENT NUMI	D10000077400		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	TERRY FALLIS, EA		
		Name of Contact Perso	n
	FALLIS FINANCIAL SERV	ICES LLC	
		Firm/ Company	
	603 63RD. AVENUE WEST	• •	
		Address	
	BRADENTON, FL 32407		
		City/ State and Zip Cod	le
	TFALLIS63@GMAIL.COM		
		ed for future annual report	notification)
	n-man address, (to be us	ed for future amuda report	inourieation)
For further informatio	n concerning this matter, pleas	e call:	
TERRY FALLIS, EA		at (407	580-8451
Name (of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Dep	artment of State:
□ \$35 Filing 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)
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee

X

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

YELLOW USA CORP

(Name of Corporation a	s currently filed with the Florida D	ept. of State)	
P19000077409			
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	atutes, this Florida Profit Corporation	adopts the following an	mendment(s) to
A. If amending name, enter the new name of the corpo	oration:		
			e new
name must be distinguishable and contain the word "corpo" Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat	"Co". A professional corporation		
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>SS</u>)	-	
		 	25
			178
			()
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
			φ
			8 30
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office		iame of the	
the state of the s			
Name of New Registered Agent			
 .	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code	·)
New Registered Agent's Signature, if changing Register		e da sa	
I hereby accept the appointment as registered agent. I am	i familiar with and accept the obligati	ons of the position.	
Signature	e 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	KURT DAMRON	803 COUNTY ROAD 466A
Add			FRUITLAND PARK, FL 32731
Remove 2) Change	Р	MARCELO GRIEBLER	14050 ISLA MORADA DR.
X Add			ORLANDO, FL 32837
Remove 3) Change		-	
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			



	(Be specific)
	
	
	
	
If an amandment provides for an eval	hange, reclassification, or cancellation of issued shares,
provisions for implementing the arms	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument it not contained in the anignument user:
(у пот арунсате, такане гом)	



The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ited by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ited by the shareholders. The number of votes cast for the amendme ficient for approval.	ent(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	\
Dated 09	(voting group) 04 2020	;
selected,	by an incorporator – if in the hands of a receiver, trustee, or other of diduciary by that fiduciary)	en ourt
N	MARCELO GRIEBLER	
_	(Typed or printed name of person signing)	
P	RESIDENT	
_	(Title of person signing)	