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25 SEP -8 AM ID: 54

025 SEP -0 M110: 38

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: YELLOW USA C	ORP	
DOCUMENT NU	P19000077409		
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	itter to the following:	
	GABRIELA TAVARES		
	_	Name of Contact Person	1
	GT CONSULTING SERVICE	CES GROUP LLC	
		Firm/ Company	
	4700 MILLENIA BLVD ST	E 500	
		Address	
	ORLANDO, FL 32839		
		City/ State and Zip Cod	e
	GTCONSULTINGSERVICE	ESGROUP@GMAIL.COM	I
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	ation concerning this matter, plea	en anth	
ror farmer morm	ation concerning this matter, piea	se can.	
GABRIELA TAV	'ARES	at (270-6314
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	E □\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) 9000077409 (Document Number of Corporation (if known) suant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following virticles of Incorporation: If amending name, enter the new name of the corporation: S USA CORP The must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "or," or "Co." or the designation "Corp." "Inc," or "Co". A professional corporation name must contain artered." "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address)	
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new registered agent and/or the new registered office address: Name of New Registered Agent	
Name of New Registered Agent	
(Florida street address)	
(Florida street address)	
New Registered Office Address: , Florida	
(City) (Zip C	'ode)
Registered Agent's Signature, if changing Registered Agent:	
reby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	

Signature of New Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

Example:

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.

X Change	<u>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
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The date of each amendment(s) date this document was signed.	adoption:	, if other than th
Effective date if applicable:		
strective date it applicable:	(no more than 90 days after amendment file	date)
Note: If the date inserted in this locument's effective date on the	block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sl	nareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for th sufficient for approval.	ne amendment(s)
	pproved by the shareholders through voting groups. The for or each voting group entitled to vote separately on the amen	~.
	st for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
09/05/20 Dated	25	
Signature	Marcelo Grisbler	
(By a selec	director, president or other officer – if directors or officers led, by an incorporator – if in the hands of a receiver, trusted inted fiduciary by that fiduciary)	
	MARCELO GRIEBLER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	