P21000013/12

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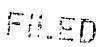
2024 JUH - 4 - KH 9: 2

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: YELLOW RIVER	OUTFITTERS INC.	
DOCUMENT NUM	BER: P21000013112		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	BRENDA CHAMBERS		
	·	Name of Contact Person	
	CHAMBERS & ASSOCIAT	res	
		Firm/ Company	
	603 N. FERDON BLVD.	Firm Company	
		Address	
	CRESTVIEW, FL 32536		
		City/ State and Zip Code	:
	BRENDA@CA-CRESTVIE	W.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call: 850	398-8088
		/de & Daytime Telephone Number	
	or the following amount made		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 essee, FL 32303

Articles of Amendment Articles of Incorporation of



(Name of Corporation	on as currently filed wit	h the Florida DepivofiState	1-1: 111 0:00
221000013112	on as carrently fried with	ii the Florida Depresianace)-4 AH 9: 26
(Docum	nent Number of Corporati	ion (if known)) <u>;</u> ;;; <u>;</u> ;
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	Statutes, this <i>Florida Pr</i>	ofit Corporation adopts the f	١.
. If amending name, enter the new name of the co	orporation:		
			The new
ume must be distinguishable and contain the word "co lnc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbre	" or "Co". A professio	or "incorporated" or the abb mal-corporation name must	reviation "Corp.," contain the word
Enter new principal office address, if applicable			
Principal office address <u>MUST BE A STREET ADD</u>	<u>PRESS</u>)		
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)		
. If amending the registered agent and/or register	red office address in Flo	rida, enter the nam <u>e of t</u> he	
new registered agent and/or the new registered			
Name of New Registered Agent		·····	
	(Florida street address)		
New Registered Office Address:	(City)	, Florida_	(Zip Code)
	,		
ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent: Lam familiar with and ac	ecept the obligations of the po	sition.
Signa	ture of New Registered A	Igent, if changing	
Theck 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)

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>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	RADFORD D. COVAN	3695 E. PLYMPTON ROAD
Add			LAUREL HILL, FL 32567
$ \begin{array}{c} X \\ \hline & \text{Remove} \\ 2) & \underline{X} \\ \end{array} $ Change	P	JOHN E. CHESSHER	102 WHEELER PLACE
2) Change Add			CRESTVIEW, FL 32539
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
		<u> </u>		
				
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			<u> </u>	
			<u> </u>	
·			 	
<u></u>				-
		•••		
				 -
			C!	
f an amendment provides for an exch provisions for implementing the ame	name, reclassification	on, or cancenation ined in the amen	dment itself:	
(if not applicable, indicate N/A)				
·				
		·	<u> </u>	

The date of each amendment(s) a	JUNE 01, 2024 doption: if oth	er 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 bedocument's effective date on the December 1.	block does not meet the applicable statutory filing requirements, this date will not be liepartment of State's records.	sted as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
MAY 30. 1	207.1	
Dated		
	Pollow D. Corn-	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	RADFORD D. COVAN	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	_