


NCTO

A0841375

	Secretary of State ASDC
	Amended Statement by Foreign Corporation (Name Change ONLY)

FILED *WJ*
 Secretary of State
 State of California
MAR 27 2020

IMPORTANT — Read Instructions before completing this form.

Additional Requirements:

- **Certificate Showing the Name Change:** If the legal name of the foreign corporation has changed in the state, foreign country or place of formation, this form **must be submitted** with a current certificate issued by the government agency where the foreign corporation was formed that certifies the change of name and includes both the old and new corporate name. (California Corporations Code section 2107.) **Note:** A certified copy of the name change amendment does not meet California statutory requirements.
- **Certificate of Name Approval (Insurers ONLY):** If the foreign corporation is subject to the Insurance Code as an insurer, this form also **must be submitted** with a Certificate of Name Approval issued by the California Insurance Commissioner. (California Corporations Code section 2106.5.)

Filing Fee – \$30.00

Copy Fees – First page \$1.00; each attachment page \$0.50;
 Certification Fee - \$5.00 plus copy fees

ICC

This Space For Office Use Only

1. Corporate Name (Enter the exact name of the foreign corporation as it is recorded with the California Secretary of State.)

J.W. BETHANY, INC.

2. New Corporate Name (Enter the new name of the foreign corporation. **Note:** The certificate from the government agency where the corporation was formed, as noted in the "Additional Requirements" section above, is not required if legal corporate name has not changed and you are merely filing this form to delete or change a "doing business as" name.)

YIPPEE ENTERTAINMENT, INC.

3. Jurisdiction (Enter the state, foreign country or place where this corporation is formed – **must match** the jurisdiction on the records of the California Secretary of State.)

4. 7-Digit Secretary of State File Number

GEORGIA	C2132659
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5. Read and Sign Below (See Instructions. Office or title not required. Do not use a computer generated signature.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

James Mittan

 Signature

JAMES A MITTAN

 Type or Print Name

STATE OF GEORGIA**Secretary of State****Corporations Division****313 West Tower****2 Martin Luther King, Jr. Dr.****Atlanta, Georgia 30334-1530****CERTIFICATE OF AMENDMENT****NAME CHANGE**

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

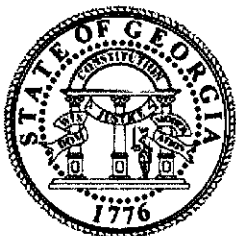
J.W. BETHANY, INC.
a Domestic Nonprofit Corporation

has filed articles/certificate of amendment in the Office of the Secretary of State on 09/18/2019 changing its name to

YIPPEE ENTERTAINMENT, INC.
a Domestic Nonprofit Corporation

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on 10/11/2019.



Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF AMENDMENT

Electronically Filed
Secretary of State
Filing Date: 9/18/2019 2:44:21 PM



Business Name : J.W. BETHANY, INC.
Control Number : K900121



The entity hereby adopts an amendment to change its name to the following new business name:

New Business Name : YIPPEE ENTERTAINMENT, INC.
Effective Date : 09/18/2019



The date of the adoption of the amendment was: 09/12/2019



The amendment was adopted by the board of directors :
With member approval.



The date of the adoption of the amendment was: 09/12/2019



The undersigned does hereby certify that a request for publication of a notice of the filing of articles of amendment to change the corporation's name along with the publication fee of \$40.00 has been forwarded to the legal organ of the county of the registered office as requested by O.C.G.A 14-3-1005.1.



Authorizer Signature : John B. Casoria

Authorizer Title : Officer