N11000005444

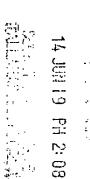
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C. CARROTHED TO

COVER LETTER

TO: Amendment Section
Division of Corporations

THE KIND MOUNTED THE KI	JSE PRODUCT	IONS, INC.
N11000005444		
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
GEORGE S. WILKINS		
	(Name of Contact Pe	erson)
THE KIND MOUSE PRODUCTIONS, IN	C.	
	(Firm/ Company	·)
3934 HUNTINGTON ST. NE		
	(Address)	
SAINT PETERSBURG, FL 33703-6040		
	(City/ State and Zip (Code)
GINA@THEKINDMOUSE.OI	RG	
E-mail address: (to be used	for future annual rep	ort notification)
For further information concerning this matter, please	call:	
GEORGE S. WILKINS	727 at (528-8975
(Name of Contact Person)	(Are	a Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida I	Department of State:
■ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status		Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Div Cli	reet Address nendment Section vision of Corporations fton Building 51 Executive Center Circle
Tallahassee, FL 32314	200	11 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE KIND MOUSE PRODUCTIONS, INC.	\$1.5 \\ \frac{1}{2} = \begin{array}{c} \frac{1}{2} & \text{in } \\ \frac{1}{2} & \text
(Name of Corporation as currently filed with the Florida Dept. of State)	14 JUN 19 PH 2: 08
N11000005444	77. 13 TH ZI U8
(Document Number of Corporation (if known)	William Co.
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For</i> mendment(s) to its Articles of Incorporation:	Profit Corporation adopts the follow
. If amending name, enter the new name of the corporation:	
	The 1
name must be distinguishable and contain the word "corporation" or "incorporated" "Company" or "Co." may not be used in the name.	or the abbreviation "Corp." or "In
Company of Co. may not be used in the name.	
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
). If amending the registered agent and/or registered office address in Florida, e	nter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent:	
(Florida street address)	
New Registered Office Address:	
	, Florida
(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the	he obligations of the position.
Signature of New Registered Agent, if cha	nging

Page 1 of 4

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 X Remove X Add	<u>V</u> <u>M</u>	ohn <u>Doe</u> like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	DENISE WHITFIELD	111 69TH ST. N
X Add			SAINT PETERSBURG, FL
Add			33702
2) Change	D	STACY WILTERS	12001 DR. MLK JR. ST N
2) Change			#3103
Add			33716
Remove 3) Change	D	ANTHONY AMOS	3015 W. VILLA ROSA PK
X Add			TAMPA, FL
Add			33611
	D	RACHEL AMOS	3015 W. VILLA ROSA PK
4) Change			TAMPA, FL
Add			33611
Remove			
5) Change			
Add			
Remove			<u></u>
6) Change			_
Add			
Remove			

amending or adding additional Arttach additional sheets, if necessary).	. (Be spec	ific)				
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Γhe	à: date of each amendment	APRIL 1, 2014 (s) adoption:	, if other than the
	te this document was signed. APRIL 1, 2014 fective date if applicable:		
	ective date <u>it applicable</u> .	(no more than 90 days after amendment file date)	
Ada	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	APF Dated	RIL 1, 2014	
	GINA Signature	A M. WILKINS	
	have r	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	GINA M.	WILKINS Sine of welker	
	PRESIDI	(Typed or printed name of person signing) ENT/FOUNDER	
		(Title of person signing)	