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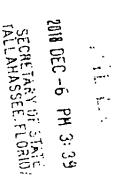
(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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DEC 12 2018 C. MCNAIR

COVER LETTER

Division of Corpo				产的
NAME OF CORPOR	ATION: Screenit	Inc		CSTHAT
DOCUMENT NUMB	er: <u>P090010</u> 0	1635		() ()
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
,	Screenit In	Name of Contact Person	n	 -
:	Screenit In	C Firm/ Company		_
ć	97367 Imi	perial oaks	Cir	_
	Bonita Sprin	City State and Zip Code	1135	_
blo	E-mail address: (to be us	Finc. Com- sed for future annual report		
For further information	concerning this matter, pleas	se call:		
Blan To	24/01Z Contact Person	at (<u>23</u> 9 Area Co	301-0180 de & Daytime Telephone Numb	oer
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment 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)	
Mailing Address Amendment Section		·	Address Iment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

Screen it Inc			
(Name of	Corporation as currently fi	led with the Florida Dept, of State)	4
Pagool 6063	.5		0.7
	(Document Number of Co	orporation (if known)	350
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006. Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the follow	ing amendment(s
A. If amending name, enter the new nar	ne of the corporation:		
			The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered." "professional associati	tion "Corp," "Inc," or "Co	". A professional corporation name mu.	
B. Enter new principal office address, it (Principal office address <u>MUST BE A ST</u>			
			
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O	<u>able:</u> FFICE BOX)	 	
	-		
D. If amending the registered agent and new registered agent and/or the new		in Florida, enter the name of the	
Name of New Registered Agent			
	(Florida street :	address)	
New Registered Office Address:		, Florida	
	(Ci	ry) (Zi	ip Code)
New Registered Agent's Signature, if ch			
I hereby accept the appointment as registe	red agent. I am familiar with	and accept the obligations of the position	1.
,			
-	Signature of New Regi	stered Agent, if changing	

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	$\underline{\mathbf{y}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
1) Change Add	VP	Peg	igy Taylor	27367 Imperial O Bonita Springs, FL	aks Cik
Remove				3413	
2) Change					
Add					
Remove					
3 } Change					
Add					
Remove					
4) Change					
Add					
Remove				· · · · · · · · · · · · · · · · · · ·	
5) Change					
Add					
Remove					
6) Change				_	
Add					
Remove					

	g or adding additional A itional sheets, if necessary). (Be specific)			
	NA				
	/V /)		•		
					
					
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	**** ·				•
	-				
	 				
	- 				
					
					<u>.</u>
f an amen	dment provides for an ex	change, reclassific	ation, or cancellatio	n of issued shares,	
provisions	for implementing the ar	nendment if not cor	<u>atained in the amen</u>	dment itself:	
- 1	applicable, indicate N/A)				
N	<u>A</u>		·		
	 ·				
		·			
-					
	,				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 12-1-18	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	cill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated D-1-18	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President (Title of person signing)	

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