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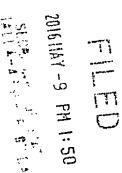
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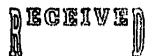
Amend/Mame

MAY - 9 2016 I ALBRITTON

COVERLETTER

Division of Corporations								
	NAME OF CORPORATION; RONCO PRODUCTIONS INC							
DOCUMENT NUMBE	DOCUMENT NUMBER: P13000086382							
	f Amendment and fee are su	bmitted for filing.						
Please return all corresp	ondence concerning this ma	tter to the following:						
Ţ	ORI LEWIS							
		Name of Contact Persor	1					
A	AT YOUR SERVICE TAX & ACCTING							
••	<u> </u>	Firm/ Company						
y	23 E KLOSTERMAN RD							
_		Address						
Τ	ARPON SPRINGS FL 3468	19						
_		City/ State and Zip Code	**************************************					
JOSIA	H.RONCO@GMAIL.COM							
	E-mail address: (to be us	ed for future amual report	notification)					
	·							
For further information	concerning this matter, pleas	se call:						
TORI LEWIS		at (⁷²⁷	683-4233 de & Daytime Telephone Number					
Name of	Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment of State:					
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43,75 Fiting Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Amen Divisi P.O. 1	ng Address idment Section ion of Corporations Box 6327 massee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle assee, FL 32301					





BY:

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2016

TORI LEWIS
AT YOUR SERVICE TAX & ACCTING
923 E. KLOSTERMAN RD
TARPON SPRINGS, FL 34689

SUBJECT: RONCO PRODUCTIONS INC

Ref. Number: P13000086382

We have received your document for RONCO PRODUCTIONS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box regarding the adoption of the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 816A00009120



April 14, 2016

TORI LEWIS AT YOUR SERVICE TAX & ACCTING 923 E. KLOSTERMAN RD TARPON SPRINGS, FL 34689

SUBJECT: RONCO PRODUCTIONS INC

Ref. Number: P13000086382

We have received your document for RONCO PRODUCTIONS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 016A00007777

Articles of Amendment to Articles of Incorporation of

tonco Productions Inc	
(Nume of Corporation as currently	y filed with the Florida Dept. of State)
13000086382	
(Document Number of	l'Carparation (il'knowa)
ursuant to the provisions of section 607,1006, Florida Statutes, this a s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
Ohm Springs, Inc	The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "cord "chartered," "professional association," or the abbraviation "	n," "company," or "incorporated" or the abbreviation 'Co". A professional corporation name must contain the
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	1003 East 19th Avenue, Tampa Ft, 33605
	2016
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	Same Same
. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	
	root address)
	root address)

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 = Vico President; T = Treusurer; 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	P'T John	Doe	
X Remove	Y Mike	Longs	
X Add	<u>SV</u> Sally	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	Elaina Roneo	1003 East 19th Avenue, Tampa, Fl
X Add			33605
Romove			
2) X Change	P,VP,T,5	Josiah D Ronco	1003 East 19th Avenue, Tampa Fl
Add			33605
Remove			
3)Change		وسيوب المستقد المستقد والمستقد والمست والمستقد والمستقد والمستقد والمستقد والمستقد والمستقد والمستقد و	Rei sakakan Beligusi dikiri sakhini ka
Add			publik fordsteppink and flerings
Remove			
4) Change			
Add			
Remove			
. Channe			
5) Change	AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	The second secon	
Add			
Remove		•	
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheats, if necessary). (Re specific)			
·			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, oravisions for implementing the amendment if not contained in the amendment itself; (If not applicable, indicate N/A)			

	April let, 2016	
The date of each amendment(s) ad late this document was signed.	óption;	, if other than the
Apri	l lat, 2016	
fiffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	derener — Marie Publis
Nuts: It the date inserted in this b document's effective date on the De	lock does not most the applicable statutory filing requirements, thus date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CRECK ONE)	
The emendment(a) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) discions for approval.	
The amendment(s) weatwere appropriately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of vees cast	for the arrandment(s) was/were sufficient for approval	
ву	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opied by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
April 1st, 2	2016	
Deted		
Signature X		
	directors president or other afficer - if directors or afficers have not been	
	ed, by an incorporator - if in the hands of a receiver, trustee, or other court	
аррой	ated fiduciery by that fiduciery)	
	Josiah D, Ronco	
	(Typed or printed name of person signing)	fr-eath-th-Magain-magain-magain-
	President	
	(Title of person signing)	