## 065631

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

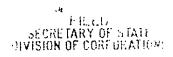
**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Moxie Motion Pict	ures, Inc	
DOCUMENT NUM	IBER: P15000065631		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Gary D Lopez		
		Name of Contact Person	1
	1391 St Lucie W Blvd		
		Firm/ Company	
	244		
		Address	<del></del>
	Port St Lucie, FL 34986		
		City/ State and Zip Cod	e
Gary	Lopez@hotmail.com		
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Gary D Lopez		760 at (	218-1938 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment 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)
An Di	niling Address nendment Section vision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of



2016 AUG 15 AM 9: 18

		MR. B. Pall AS. Was S.B. W. A. A. A. Chara.
( <u>Name or C</u> P15000065631	corporation as currenti	y filed with the Florida Dept. of State)
13000003031	(D	
	(Document Number o	f Corporation (if known)
ursuant to the provisions of section 607.100 s Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name	e of the corporation;	
/A		The new
	on "Corp," "Inc," or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
Enter your pulpated office address if a	annii aabla.	N/A
<ul> <li>Enter new principal office address, if a Principal office address MUST BE A STR</li> </ul>		
	-	
		N/A
. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		N/A
		N/A
		N/A
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX) or registered office addi	ress in Florida, enter the name of the
(Mailing address MAY BE A POST OF  If amending the registered agent and/o new registered agent and/or the new registered agent.)	FICE BOX) or registered office addi	ress in Florida, enter the name of the
(Mailing address MAY BE A POST OF	FICE BOX)  or registered office address	ress in Florida, enter the name of the
(Mailing address MAY BE A POST OF  If amending the registered agent and/o new registered agent and/or the new registered agent.)	FICE BOX)  or registered office address /A	ress in Florida, enter the name of the
(Mailing address MAY BE A POST OF  If amending the registered agent and/o new registered agent and/or the new registered Agent  Name of New Registered Agent	FICE BOX)  or registered office address  /A  (Florida str	ress in Florida, enter the name of the
(Mailing address MAY BE A POST OF  If amending the registered agent and/o new registered agent and/or the new registered Agent  Name of New Registered Agent	or registered office address /A  (Florida str	ress in Florida, enter the name of the

## 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	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	Cortney Morris	1391 St Lucie W Blvd
Add			244
X Remove			Port St Lucie, FL 34986
2) Change	P	Gary D Lopez	1391 St Lucie W Blvd
X Add			244
Remove			Port St Lucie, FL 34986
3) Change	S	Cortney Morris	1391 St Lucie Blvd
X Add			244
Remove			Port St Lucie, FL 34986
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6)Change			
Add			<del> </del>
Remove			

E. If amending or adding additional Arti	cles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
<del></del>	
<del></del>	
E If an amandment provides for an evol	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
N/A	
	<del> </del>
	The second secon

July 19, 2016 The date of each amendment(s) adoption:		entel						
ate this document was signed.		THISTON OF CURPORATION						
Effective date if applicable:		2016	AUG	15	AM	9:	18	
· · · · · · · · · · · · · · · · · · ·	(no more than 90 days after amendment file date)							
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date w	ill not	be li	sted	as th	10	
Adoption of Amendment(s)	(CHECK ONE)							
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment icient for approval.	ıt(s)						
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ment						
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval							
by	(voting group)							
	(voting group)							
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	lder						
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder							
July 19, 201	6							
Dated								
Signature	Cerry Jopa							
(By a old	ector, president or other officer - if directors or officers have not bee							
selebred,	by an incorporator - if in the hands of a receiver, trustee, or other co	urt						
appointe	d fiduciary by that fiduciary)							
(	Fary D Lopez							
-	(Typed or printed name of person signing)		······································	<del></del>				
P	resident							
<del>-</del>	(Title of person signing)	<del></del> -	<del>*</del>		_			