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Office Use Only



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COVER LETTER

Division of Corpor	ations			
NAME OF CORPORA DOCUMENT NUMBE	017	0000019	JNC. 691	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:	•	
	DREW	AXELROD	, PRESIDENT	
_	EXPO	Name of Contact Perso MEDIA	, INC.	
_	4846	Firm/Company	NIVERSITY DRIVE	#134
	LAND	ERHILL,	FU 33351	
	lxpon	City/ State and Zip Cod	hot mail. com	
For further information	E-mail address: no be us	sed for future annual report se call:	notification)	
DREW Name of	AXELRO Contact Person	at (<u>/ / / /</u>	2 46-3515 de & Daytime Telephone Number	
Enclosed is a check for	the following amount made		•	
\$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)	
25 111		G 4		

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

EXPO MEDIA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

its Articles of Incorporation:			
A. If amending name, enter the new name of the c	corporation:		
			The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co"	". A professional corpora	
B. Enter new principal office address, if applicable			ut.
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)		
	-		
	-		
C. Enter new mailing address, if applicable:			50 5
(Mailing address MAY BE A POST OFFICE BO	<u>0x</u>) _	,	- P M
			<u> </u>
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address	in Florida, enter the nan	<u>ie of the</u>
new registered agent and/or the new registered	r office address.		
Name of New Registered Agent			
	(Florida street d	address)	
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
	}		
Nove Desistanted Amentic Simple if the mains De	saintaned Agents		
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	l am familiar with	and accept the obligation.	s of the position.
		-	
Signature of N	New Registered Age	nt, 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 bei	ng 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: XChange	PT John Doe
X Remove	<u>V</u> <u>Mike Jones</u>
X Add	SV Sally Smith
Type of Action (Check One) 1) Change	Title Name Address D GEORGE CHRIS KARAMAGANIS 161 MADEIRA AVE.
Add Remove	TANE B.THEBERGE 33334
2) Change Add	1212 BAHAMA BEND
Remove 3) Change Add	SUITE H1 COCONUT CREEK, FL 33066
Remove 4) Change Add	T CAREN E. BERMAN 7435 NW 44th ST. #1210
Remove 5) Change	VP CAREN E. BERMAN 7435 NW 44th ST. #1210
Add Remove 6) Change	D CARL G. CHARLES 49 N. FEDERAL HWY.
Add	Page 2 of 4 # 109 POMPAND BEACH, FL 77067
	Page 2 of 4 33062

amending or adding	additional Articl	les, enter chan	ge(s) here:			
ttach <i>additional sheei</i>	s, if necessary).	(Be specific)				
						
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an amendment prov	<u>/ides for an excha</u>	nge, reclassifi	cation, or car	ncellation of i	ssued shares,	
provisions for impler (if not applicable,	nenting the amend indicate N/A)	ament if not co	ontained in t	ne amenamer	it itself:	
(i) not appricative,			\			
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The date of each amendment(s) adoption: 9/12/12, amending Officer and Director 9/12/12 (no more than 90 days after amendment file date)
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 cast for the amendment(s) was/were sufficient for approval
by"
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
(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)
DREW AXELROD
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)