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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Superior	Entertainme	ent Group, Inc.				
DOCUMENT NUMBER: N1200000689						
The enclosed Articles of Amendment and fee are sub	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
Derrick Ivory						
	(Name of Contact Person	1)				
Superior Entertainment	Group, Inc.					
	(Firm/ Company)					
2634 Graves Road #2						
	(Address)					
Tallahassee, FL 32303						
	(City/ State and Zip Code	e)				
kenneth@comcas						
E-mail address: (to be used For further information concerning this matter, please	•	notification)				
Derrick Ivory		434-3269				
(Name of Contact Person)		ode & Daytime Telephone Number)				
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:				
□ \$35 Filing Fee	□\$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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle				

Articles of Amendment to Articles of Incorporation of

·	filed with the Florida Dept. of State)		
N12000000689			
(Docui	ment Number of Corporation (if known)		
ursuant to the provisions of section 617.10 mendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florida Not Fo</i> ron:	r Profit Corporation adopts the fol	llowin
. If amending name, enter the new nan	ne of the corporation:		
·			he nev
ame must be distinguishable and contain i <u>Company" or "Co." may not be used in t</u>	the word "corporation" or "incorporated he name.	" or the abbreviation "Corp." or	"Inc."
. Enter new principal office address, if	applicable:		
Principal office address <u>MUST BE A STI</u>			
		<u> </u>	
. Enter new mailing address, if applica	nbla:		
(Mailing address MAY BE A POST OF			
-			
	· · ·		
			
. If amending the registered agent and	or registered office address in Florida,	anter the name of the	
new registered agent and/or the new		enter the name of the	
Name of New Projectured Aports			
Name of New Registered Agent:		 	
-			
New Registered Office Address:	(Florida street address)		
		E1	
-	(City)	, Florida (Zip Code)	
		(zip Code)	
ew Registered Agent's Signature, if cha		at a at the asterna a Cate on a sist	
nereby accept the appointment as register	red agent. I am familiar with and accept	the ortigations of the position.	
		79 1 1	'هسين

Page 1 of 4

BJUL 12 AHII: OF STATE

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>	John Do Mike Jo Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>		<u>Name</u> .	<u>Addres</u> s
1) Change		-		
Add				
Remove				
2) Change		-		
Add				
Remove				
3) Change				
Add		•		
Remove				
4) Change				
		-		
Add Remove				
Kemove				
5) Change		-		
Add				
Remove				
6) Change		-		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The organization is organized exclusively for charitable, religious, educational, and scientific purposes,
including, for such purposes, the making and distributions to organizations that qualify as exempt organizations
under section 501(c)(3) of the International Revenue Code, or corresponding section of any future federal tax code.
Our challenge is to continue to work and uplift humanity.
2. Throughout the year, to mentor youth, sponsor blood drives, raise
money for scholarships and charitable causes and start initiatives that
encourage our Members to make a difference in the lives of the community
3. To encourage high standards; community service and assist in the
building of character and leadership development among men.

The	e date of each amendment(s) adoption: JUIY 10, 2013 e this document was signed.	, if other than the
	ective date if applicable: July 12, 2013	
	(no more than 90 days after amendment file date)	-
Ade	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated July 12, 2013	
	Signature Denial of vous	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Derrick Ivory	
	(Typed or printed name of person signing) CEO	
	(Title of person signing)	