N14000007394

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
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(Do	cument Number)			
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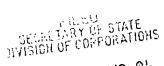
1. Levois 11-17-14

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Block head Entertainment, IND DOCUMENT NUMBER: N14000007394
DOCUMENT NUMBER: N14000007394
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chanwon Florence. (Name of Contact Person)
26290 SW 136 Place. (Firm/Company)
HomesTeed 171 33032
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chanwon Florence at (786) 238 - 3222 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
Stiling Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Status Certified Copy (Additional Copy is Enclosed) Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



14 NOV -5 PH 12: 04

(Name of Corporation as currently filed with the Florida Dept. of State)
1111/00/00/07/214
Blockhead Entertainment, TW 19700000 (Document Number of Corporation (if known)
(Document Number of Corporation (II known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Heal A" Heart INC The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: Chanwon Florence.
(Principal office address MUST BE A STREET ADDRESS) 26290 SW 136 Place
Homestead, 71 33032
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: Chanwon Florence.
Name of New Registered Agent: Chanwon Florence. 26290 SW 136 place HomesTeed, 71:33032 (Florida street address)
New_Registered Office Address:
26290 SW 136P Florida 33032
26290 SW 136 P . Florida 33032 (Zip Code)
\sim 6/
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. If am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

Page 1 of 4

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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Kayne Farquhason	26327 SW 135 Pley Homes to B3032
Add Remove			
2) Change P/C	<u>EO</u>	Chanwon Florence.	26290 SW 131ples Homestead, 71 33032
Remove 3) Change Add Remove	<u>vP/</u> c	Jillian Matthews	26290 SW 136 place. Homestead, 71 33032
4) Change Add Remove	<u>s</u> (Jill Dukes	14001 N.W 4th Street Apt 307 Pembroke Pine, 7/33028
5) Change Add Remove	工	Channeka Florence	14025 SW 262 Lane Apt 2 Homestead, 71 33032
6) Change Add Remove			

f amending or addi attach additional she	ets, if necessary).	(Be specific)					
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The date of each amendment(s) adop	ption:	111111	_, if other than the
date this document was signed.	lat.	SCURE TARY OF STATE	
Effective date if applicable:	(no more than 00 days after am	endment file Acte 10V -5 PH 12: 04	_
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number	r of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	ers entitled to vote on the amendments.	(s). The amendment(s) was/were	
Dated	13/2014		
Signature	Alvator		_
	nan or Mce chairman of the board, properties, by an incorporator — if in		
	prointed fiduciary by that fiduciary)	and minds of a receiver, musice, er	
(HANGE	FLORENCE		
	yped or printed name of person sig	ning)	
	(Title of person signing)		