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NOV 1 4 2018

COVER LETTER

.TO: Amendment Section Division of Corporations

NAME OF CORPORATION:Saturate,Inc
DOCUMENT NUMBER: N18000006062
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Theo Koulianos
(Name of Contact Person)
Saturate, Inc
(Firm/ Company)
36750 US HWY 19 N #2051
(Address)
Palm Harbor, FL 34684
(City/ State and Zip Code)
theo@saturate.tv
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Theo Koulianos 321 262-2806
(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:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) □ \$643.75 Filing Fee & □ \$64

Mailing Address

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

Aal	of _			
Margine 1	<u> Lnc</u>	- Florido Dona of Si		
(Name of Corporation as cu		e riorida Dept. of Si	<u>(816</u>)	
(Document N	N18000006062 lumber of Corporation	n (if known)		<u></u>
	•			
Pursuant to the provisions of section 617,1006, Florida St amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida N</i>	ot For Profit Corpor	ration adopts the f	ollowing
A. If amending name, enter the new name of the corpo	oration:			
L division in the last of the				The new
name must be distinguishable and contain the word "corp <u>"Company" or "Co." may not be used in the name</u> .	poration or incorp	orated or the abbre	viation "Corp. oi	r "Inc.
B. Enter new principal office address, if applicable:	36750 US HWY	7 19 N #2051		
(Principal office address MUST BE A STREET ADDRE	ESS) Palm Harbon	r, Fl 34684		
	<u> </u>	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	36750 US HW	Y 19 N #2051	7.0	18
	Palm Harbor,	, Fl 34684		<u> </u>
			V	1 &
D. If amending the registered agent and/or registered		orida, enter the nam	e of the	i dis
new registered agent and/or the new registered offi	ice address:			; 20
Name of New Registered Agent:				
36750	0 us Hwy 19 N #2	051		
New Registered Office Address:		(Florida street addres	3)	
_	n Harbor		34684	
	(Cin)	- -	Florida	
New Registered Agent's Signature, if changing Registe	ered Agent:			
hereby accept the appointment as registered agent. I ar		accept the obligations	of the position.	
	Signatury of Nov	Pagistarud Igant if s	shanaina	
	Signature of New	Registered Agent, if c	nanging	

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 Dx V Mike Jc SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	Pres	Theodore Koulianos	36750 US HWY 19 N #2051 Palm Harbor, Fl 34684
<u> </u>			
Remove			
2) X Change	Sec	Rachel Koulianos	36750 US HWY 19 N #2051 Palm Harbor, Fl 34684
Add			
Remove 3)X_ Change	Tres	Benny Cruz	1150 PERDUE LANE Sanford, Fl 32771
Add			
Remove			
4) Change			
Add			
Remove			
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 following changes have been made to Saturate, Inc:						
						
						

.

	e date of each amendment(s) adoption:e this document was signed.	_, if other than the
Effe	fective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be turnent's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (CHECK ONE)	
Ö	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.	
	10/4/2018 12:48:16 PM PDT Dated	
	Signature OCC	
	(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)	-
	Theodore Koulianos	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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