N23000006633

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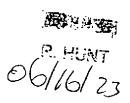
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	FEmuscripts Produc	etins Inc	·			
DOCUMENT NUMBER:	N23000006633					
The enclosed Articles of Art	nendment and fee are sub	omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following:				
Laurie Tanner						
		(Name of Contact Perso	on)			
FEmuscripts Productins Inc	2 .				-	7-3
		(Firm/ Company)	· · · · · · · · · · · · · · · · · · ·	·	 	
133 N Pomapno Beach Blv	rd, Apt 1102,				ر درون م درون ما درون مسدم محسر	<u>2</u>
		(Address)		•	200	
Pompano Beach, FL 33062					E, FA	PM 7: 2
		(City/ State and Zip Cod	de)			
femuscripts@gamil.com						
1	E-mail address: (to be use	d for future annual report	notification	.)		
For further information con	cerning this matter, please	e call:				
Laurie Tanner			954) 649-058			
	(Name of Contact Person			(Daytime Tele	phone Num	iber)
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	partment of S	State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)		
Mailing .	Address	Street	Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

remuscripts Froductins Inc.					
(Name of Corporation as currently filed with th	<u>e Florida I</u>	Dept. of State)			
N23000006633					
(Docur	nent Numb	er of Corporation (if l	mown)	-	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida Not F</i>	or Profit Corporation	adopts the f	following
A. If amending name, enter the new name of th			_		
Femuscripts Productions, Incorporated name must be distinguishable and contain the work	Tion	cet spelling o	of Production	η -15	The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam	d "corpora	tion" or "incorporate	d" or the abbreviation	"Corp." o	r "Inc."
B. Enter new principal office address, if applica	shle:	N/A			
(Principal office address MUST BE A STREET A)			
		· · · · · · · · · · · · · · · · · · ·		 	177
					:3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)	N/A			
				SS: DS:	i
				E S	_≚ ;
		 		_ 	`
D. If amending the registered agent and/or regi	stered offi	ce address in Florids	, enter the name of th	e ' H	2
new registered agent and/or the new register				_	
Name of New Registered Agent:	N/A				,
		(F	Florida street address)		
New Registered Office Address	:				
	N/A		, Florid	a	
		(City)	, Florid (Zip	Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			t the obligations of the	position.	
	NIA				
	Si	ignature of New Regis	tered Agent, if changin	8	

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>PT</u> Y <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	NIA	_	
Remove			A.
2) Change Add	N/A		
Remove 3) Change Add Remove	NIA		
4) Change Add	NIA		
Remove			
5) Change Add	<u>M/A</u>	_	
Remove			
6) Change Add	NiA		
Remove			
E. If amending or additional she	ing addition	onal Articles, enter change(s) here: essary). (Be specific)	
Na			
			
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			-
The date of each amendment(s) adoption:		_, if othe	er than the
Effective date if applicable: 6/12/2023 (no more than 90 days after amendment file date)			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.		e listed	as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the members and the number of votes cast for the ame was/were sufficient for approval.	endment(s)		

Dated	06/12/2023
Dated	
Signature	· dawl Tumer
~	(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)
	Laurie E. Tanner
	(Typed or printed name of person signing)

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