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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: STUDIOUNO VIE	DEO PRODUCTIONS, INC	D		
DOCUMENT NUMB			<u> </u>		
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	HERNAN SPIVAK				
	Name of Contact Person				
	Firm/ Company				
	21021 NE 24TH AVE				
	MIAMI, FL 33180	Address			
		City/ State and Zip Cod	e		
ME@	HERNANSPIVAK.COM				
<u> </u>		sed for future annual report	notification)		
For further information	n concerning this matter, pleas		796-3529		
	of Contact Person	at (Area Co	de & Daytime Telephone Number		
	r 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)		
Ame Divi P.O.	ling Address Indigent Section Indigent S	Ameno Divisio Clittor 2661 F	Address Iment Section on of Corporations i Building Executive Center Circle assec, FL 32301		

Articles of Amendment to Articles of Incorporation of

STUDIOUNO VIDEO PRODUCTIONS INC.

(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P02000006454	,
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
HS VIDEO PRODUCTIONS, INC.	The new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	三 三 三 一
	105 or
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2
(maning undress MAT BE A FOST OFFICE BOX)	
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addr	
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	
Signature of Ne	w Registered Agent, 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 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	PT	John Do	<u>oc</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1)Change		_		-	
Add					
Remove					· · · · · · · · · · · · · · · · · · ·
2) Change					
Add		_		•	
Remove				•	
3) Change		_		•	
Add					
Remove					
4) Change		_			
Add					
Remove					
					
5) Change		_			-
Add					
Remove					
0 0					
6) Change		_			
Remove					

Attach <i>additioi</i>	r adding additional Artical sheets, if necessary).	(Be specific)			
-					
<u></u> -					
·					
_			_		
_					<u> </u>
provisions fo	ent provides for an exch r implementing the amer plicable, indicate N/A)	ange, reclassifica adment if not con	tion, or cancellati tained in the ame	on of issued share ndment itself:	<u>, </u>
				·	
·			-		·

· · · · • The date of each amendment(s)	NOVEMBER 10, 2017	, if other than the
date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
-	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
NOVEN Dated	иВЕК 10, 2017	
	D. las	
Signature	The state of the s	_
sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	HERNAN SPIVAK	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	