## P02000046582

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SECRETARY OF STATE

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C. LEWIS

OCT 2 9 2013

EXAMINER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:SHow	TITLE AUDIO & VIDED INC.
DOCUMENT NUMBER: PO2000	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Liliana	Name of Contact Person
	Name of Contact Person
SHOWTIM	Firm/Company
	Firm/ Company
	1 16+m STREET C19 Address
MiAMI -	FLOQUIDA - 33015 City/ State and Zip Code
	City/ State and Zip Code
E-mail address: (to be	used for future annual report notification) case call:
LILIANA MESQUITA	at ( 305 ) 443 5555  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	<del>_</del>
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

APPROVED AND FILED

## Articles of Amendment to Articles of Incorporation of

13 OCT 23 PM 1: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA

SHOWTIME AUDIO 6 VIDEO JNC.	CONIDM
(Name of Corporation as currently filed with the Florida Dept. of State)	
P02000046582	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ving amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mu word "chartered," "professional association," or the abbreviation "P.A."	abbreviation st contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del></del>
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:	<del></del>
Name of New Registered Agent	
(Florida snee address)	
New Registered Office Address:, Florida, Florida, [Zip Code]	<del></del>
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position of the pos	on.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name	e, 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	JACOBY SETH A.	680 NE GYMST
Add Remove			#1210 MAHI FLORIDA -3313B
2) Change			
Remove			
Change  Add			
Remove 4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Remove			

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an amendment provides for	an exchange, reclassifi	cation, or cancellation	of issued shares,
	the amendment if not co	ontained in the amend	ment itself:
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APPROVED AND FILED

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)