P04000061102

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800036230658

05/17/04--01085--002 **43.75

OL MAY 17 AN 10: 12

Ps 5/24/04

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:	STUDIO V OF	JAX, INC-	
DOCUMENT N	UMBER: <u>P0400</u>	0061102	
	icles of Amendment and fee		
Please return all c	orrespondence concerning th	is matter to the following:	
	BARBARA	MEARS ame of Person)	<u>: ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	(Name	of Firm/ Company)	
	1604 coau	(Address)	
	ATLANTIC (City/S	BEACH, FL. tate/ and Zip Code)	<u> 3223</u> 3
	ation concerning this matter,		
BARB	(Name of Person)	at (<u>904</u>) <u>247</u> (Area Code & Daytim	2-9090 ne Telephone Number)
Enclosed is a chec	k for the following amount:		
□ \$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)
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations	;

409 E. Gaines Street

Tallahassee, FL 32399

FILED

Articles of Amendment to Articles of Incorporation of

04 MAY 17 AM 10: 12

TALLAHASSEE. FLORIDA

STUDIO V OF (Name of corporation as curr	JAX, II	C , e Florida Dept. of S	State)	<u> </u>
Pursuant to the provisions of section 607.1006	ber of corporation 5, Florida Statut	es, this <i>Florida</i>	Profit Corporation	on
adopts the following amendment(s) to its Artic	_	ation:		
MEW CORPORATE NAME (if changing): BARBARA MEARS (must contain the word "corporation," "company," or AMENDMENTS ADOPTED - (OTHER TH	AT STU "incorporated" or	HANGE) Indica		
and/or Article Title(s) being amended, added of	V	· · · · · · · · · · · · · · · · · · ·		•
<u> </u>		<u> </u>		
<u> </u>	<u></u>	<u> </u>	<u></u>	
· · · · · · · · · · · · · · · · · · ·			<u> </u>	
	* * · · · · · · · · · · · · · · · · · ·			
	<u></u>		· · · · · · · · · · · · · · · · · · ·	<u></u>
and the second s	<u></u>	<u> </u>	<u> </u>	
			·	
		<u> </u>		. 1 -
(Attack addi	tional pages if nec	i i		<u></u>
If an amendment provides for exchange, reclass for implementing the amendment if not contain	ssification, or ca	uncellation of is: dment itself: (if	not applicable, indica	ate N/A)
	* :		<u>. 9- i.</u>	

(continued)

The date of each amendment(s) adoption: 5-5-04
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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 by
(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.
Signed this 12 day of MAY , 2004.
Signed this 12 day of MAY, 2004. Signature Sarbara D Means
(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)
PRESIDENT
(Title of person signing)

FILING FEE: \$35