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TO: Amendment Section

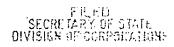
Division of Corporations

NAME OF CODBODATION. HOLL	good digital lax.					
name of corporation: Hollywood digital, INC DOCUMENT NUMBER: PO400087623						
The enclosed Articles of Amendment and fee are						
Please return all correspondence concerning this	matter to the following:					
G!	Name of Contact Person					
	Name of Contact reison					
	Firm/ Company					
. 3	701 N 29 AVR					
	701 N 29 AVC Address					
+(City/ State and Zip Code					
	City/ State and Zip Code					
	hollywoxligital. (cm eused for future annual report notification)					
For further information concerning this matter, pl	ease call:					
Cladys Hassin	at (954) 9243300 Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:					
\$35 Filing Fee \$\text{Certificate of Status}\$						
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 of



Hollywa	boc	219	Hal	Inc	16 MA	R 2 I	PĦ	1:34
(Name of Corpora		urrently fi	led with th	e Florida D	ept. of State)			
	alla	200£	2627					
(Doct	ument Nu	mber of C	$\frac{1623}{0$	if known)				
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statute	es, this <i>Fla</i>	orida Profit	Corporation	adopts the fo	llowing	g amer	ndment(s) to
A. If amending name, enter the new name of the	corporat	ion:						
							_The	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Col word "chartered," "professional association," or th	rp," "Inc,	," or "Co	". A profe					
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL)					· .	_
						••		
				·-	· · · · · · · · · · · · · · · · · · ·			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	20 V)							
(mutting uturess <u>mAT BE A FOST OFFICE B</u>	<u>101</u> /				•			
		,		-				_
						_		_
D. If amending the registered agent and/or registered agent and/or the new registered			s in Florida	, enter the n	ame of the			
Name of New Registered Agent							_	
	(Fla	orida street	address)					
New Registered Office Address:					, Florida			
		(Ci	ity)			(Zip C	Code)	
New Registered Agent's Signature, if changing R	agistored	A gont:						
I hereby accept the appointment as registered agent			h and accep	t the obligati	ions of the pos	ition.		
Sis	gnature of	f New Regi	istered Agei	nt, if changin	<u></u>		-	

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	<u>PT</u> <u>Jol</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	SV Sal	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		Gladys Hassin	379 N 29 AVR Hollywood Fr 33020
X Add		,	Hollywood Fe 33020
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) her (Be specific)			
<u> </u>				
				
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				· · · · · · · · · · · · · · · · · · ·
				<u> </u>
	<u>iange, reclassification, o</u>	r cancellation of issu	ed shares.	
f an amendment provides for an excl		. In the amenament it	<u>seii:</u>	
provisions for implementing the ame	ndment if not contained	the the amountainer		
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	the amenatione in		
provisions for implementing the ame	ndment if not contained	THE SHIELD STATE OF		
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provisions for implementing the ame	ndment if not contained			
provisions for implementing the ame	ndment if not contained			

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(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, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ıt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	a Division
by" (voting group)	SECRE ISIGN
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	Ider <u>2</u> 등록표
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	PM 1: 31
Dated_3 16 16	₩ 988
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 coappointed fiduciary by that fiduciary)	urt
Toseph Hassin	
(Typed or printed name of person signing)	
P	
. (Title of person signing)	