P06000130148

| (Red | questor's Name) | |
|-------------------------|-------------------|-----------------|
| (Add | dress) | |
| (Add | dress) | , |
| (City | y/State/Zip/Phone | ; #) |
| PICK-UP | ☐ WAIT | MAIL |
| • | | |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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06/28/10--01035--017 **35.00

GECRETARY OF STATE

TABLE OF

Roll

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: | MMC VIDEO, CORPORA | ATION |
|--|--|---|--|
| DOCUMENT NU | JMBER: | P06000130148 | · |
| The enclosed Artic | cles of Amendment and fee a | are submitted for filing. | |
| Please return all co | orrespondence concerning th | is matter to the following: | |
| | | BERTO MIQUELINI | |
| | N | Name of Contact Person | • |
| | MMC \ | /IDEO CORPORATION | <u>, </u> |
| • | | Firm/ Company | |
| ē | 1401 NE MIAI | MI GARDENS DRIVE APT 688 | 3 |
| | | Address | ; |
| | | MIAMI, FLORIDA 33179 | |
| | | City/ State and Zip Code | |
| | MILLIES@ E-mail address: (to be use | DBELLSOUTH.NET of for future annual report notification) | |
| For further informa | ation concerning this matter, | please call: | |
| | RTO F. MIQUELINI | | 7338551 |
| | of Contact Person | Area Code & Daytime Te | • |
| Enclosed is a checi | k for the following amount n | nade payable to the Florida Depar | tment of State: |
| ☑ \$35 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| 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 Circ | le |
| | | Tallahassee FL 32301 | |

Articles of Amendment Articles of Incorporation

MMC VIDEO CORPORATION

| Name o | of Corporation | as currently | v filed with the | Florida Dent. | of State) |
|--------|----------------|--------------|------------------|---------------|-----------|
| | | | | | |

| (Name of Corporation as cu | <u>irrently filed wi</u> | th the Florida Dept. | of State) |
|--|--------------------------|-------------------------------|---|
| P0600013 | 0148 | | |
| | | oration (if known) | Contract of the second |
| Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation | | atutes, this <i>Florida 1</i> | Profit Corporation adopts the following |
| A. If amending name, enter the new nam | e of the corpora | ition: | |
| | N/A | | The new |
| name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," " | the designation | "Corp," "Inc," or " | Co". A professional corporation |
| B. Enter new principal office address, if a | applicable: | 1401 NE MIA | MI GARDENS DR |
| (Principal office address <u>MUST BE A STR</u> | | Apt 688 | > |
| • | | MIAMI, FLOR | RIDA 3379 |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF | | N/A | |
| | | N/A N/A | |
| D. If amending the registered agent and/ | or registered off | | da, enter the name of the |
| new registered agent and/or the new r | | | |
| Name of New Registered Agent: | N/A | | |
| , | N/A | | <u> </u> |
| New Registered Office Address: | (F | lorida street address) | |
| | N/A | | , Florida N/A |
| | (C | ity) | (Zip Code) |

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.

Signature of New 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|---|---|--|------------------------------|
| TD | MICHAEL JESUS VALDES | 6380 NW 37TH TERRACE VIRGINIA GARDENS, FL 33166 | □ Add □ Remove |
| | | | |
| | | | |
| | ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec | | |
| N/A' | | | |
| | | | · |
| | , | <u>-</u> | |
| | | | |
| | | | 1 |
| <u>provisi</u> | mendment provides for an exchange, recons for implementing the amendment in applicable, indicate N/A) | eclassification, or cancellation of f not contained in the amendmen | issued shares, nt itself: |
| N/A | | · | |
| , | | | 1 · · · |
| | | | |
| | | | |
| | | | |
| *************************************** | | | |

| The date of each amendment | (s) adoption: 06/23/2010 |
|--|--|
| Effective date if applicable: | (date of adoption is required) |
| Enecuve uste <u>n applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/we by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement of 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 | 95 |
| | (voting group) |
| The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder |
| Dated 06/2 | 2/2010 |
| sele | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
| | ROBERTO F. MIQUELINI |
| | (Typed or printed name of person signing) |
| | |
| | PRESIDENT |
| | (Title of person signing) |