

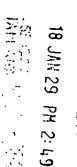
| (Re                     | questor's Name)     |           |
|-------------------------|---------------------|-----------|
| (Ad                     | dress)              |           |
| (Ad                     | ldress)             |           |
| (Cit                    | ty/State/Zip/Phone  | #)        |
| PICK-UP                 | ☐ WAIT              | MAIL      |
| (Bu                     | isiness Entity Name | e)        |
| (Do                     | ocument Number)     |           |
| Certified Copies        | _ Certificates o    | of Status |
| Special Instructions to | Filing Officer:     |           |
|                         |                     |           |
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Office Use Only



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01/29/18--01020--001 \*\*35.00



R. WHITE

## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

| NAME OF CORPORATION: DIGITAL IMAGE   | BUSINESS SOLUTIONS   | INC   |
|--|--|---|
| DOCUMENT NUMBER: P08000008090  |  |   |
| The enclosed Articles of Amendment and fee are sub-  | bmitted for filing.  |   |
| Please return all correspondence concerning this mat   | ter to the following:  |   |
| GREGG ANDERSON   |  |   |
| ·  | Name of Contact Person   |   |
| <del></del>  | Firm/ Company  |   |
| 5353 97TH STREET CIRCLE  | E EAST   |   |
| BRADENTON, FL 34211  | Address  |   |
|  | City/ State and Zip Cod  |   |
| LYNNKUIKENCPA@GMAIL.CO   | 0M   |   |
| E-mail address: (to be us  | ed for future annual report  | notification)   |
| For further information concerning this matter, pleas  | e call:  |   |
| LYNN KUIKEN  | 941<br>at (  | 927-4939  |
| Name of Contact Person   | Area Co  | de & Daytime Telephone Number   |
| Enclosed is a check for the following amount made p  | payable to the Florida Depa  | artment of State:   |
| ■ \$35 Filing Fee  | □\$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 | Amend<br>Divisi<br>Clifto<br>2661                                  | Address Iment Section on of Corporations Building Executive Center Circle             |

## Articles of Amendment



18 JAN 29 PH 2: 49

## Articles of Incorporation of

| DIGITAL IMAGE BUSINESS SOLUTIONS INC  |                                 | 10 JAN 25 111 2: 45 |  |  |
|---|---------------------------------|---------------------|--|--|
| ( <u>Name</u>   | of Corporation as currently     | filed wi            | h the Florida Dept- of State)  |  |
| P08000008090  |                                 |                     | TAIL ONE COMME   |  |
|   | (Document Number of             | Corporat            | on (if known)  |  |
| Pursuant to the provisions of section 607 its Articles of Incorporation.            | .1006, Florida Statutes, this F | lorida P            | rofit Corporation adopts the following amendment(s) to                                     |  |
| A. If amending name, enter the new na   | ame of the corporation:         |                     |  |  |
| BRAND MANAGEMENT LABS, INC  |                                 |                     | The new  |  |
|   | nation "Corp," "Inc," or "C     | o". A p             | nany," or "incorporated" or the abbreviation rofessional corporation name must contain the |  |
| B. Enter new principal office address, if applicable:                               |                                 | 5353 9              | 7TH STREET CIRCLE EAST   |  |
| (Principal office address <u>MUST BE A S</u>  |                                 | BRAD                | ENTON, FL 34211  |  |
|   |                                 |                     |  |  |
| C. Enter new mailing address, if appl<br>(Mailing address MAY BE A POST             |                                 | 5353 9              | 7TH STREET CIRCLE EAST   |  |
|   |                                 | BRAD                | ENTON, FL 34211  |  |
|   |                                 |                     |  |  |
| D. If amending the registered agent an new registered agent and/or the new          | w registered office address:    | ss in Flo           | rida, enter the name of the  |  |
| Name of New Registered Agent  | LYNN KUIKEN PL                  |                     |  |  |
|   | 1251 S TAMIAMI TRAIL            |                     |  |  |
|   | (Florida stree                  | ı address           |  |  |
| New Registered Office Address:  | SARASOTA                        |                     | , Florida 34239  |  |
|   |                                 | ĥγ)                 | (Zip Code)   |  |
| New Registered Agent's Signature, if c<br>I hereby accept the appointment as regist | tered agent. I am familiar wi   |                     |  |  |
|   | Lynn A<br>Signatore of New Reg  | <u>Su</u>           | ken  |  |
|   | Signatuse of New Reg            | gistered .          | agent, if changing   |  |

|   |                          |   |  | i omcer/a    | irector being removed and title, name, and  |
|---|--------------------------|---|--|--------------|---|
| address of each Officer a<br>(Attach additional sheets, |                          |   | eing added:                                  | j            |   |
|   |                          |   | rst letter of the office title:              | ]            |   |
| $P = President; \widetilde{V} = Vice F$                 | <sup>&gt;</sup> resident | T= Tree                                 | nsurer; S= Secretary; D= Director            |              | istee; C = Chairman or Clerk; CEO = Chief<br>an one title, list the first letter of each office |
| held, President, Treasurei                              |                          |   |  |              | ,   |
|   |                          |   |  | d as the P.  | ST and Mike Jones is listed as the V. There is  |
|   |                          |   |  |              | ould be noted as John Doe, PT as a Change,  |
| Mike Jones, V as Remove,                                |                          |   |  |              | 2,  |
| Example:  |                          | ., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | ļ            |   |
| X Change  | PT                       | John Do                                 | <u>e</u>                                     |              |   |
| X Remove  | <u>V</u>                 | Mike Jo                                 | nes  |              |   |
| X Add   | <u>SV</u>                | Sally Sn                                | nith   |              |   |
| Type of Action<br>Check One)                            | <u>Title</u>             |   | Name   |              | <u>Addres</u> s   |
| X Change  | DPST                     | _                                       | GREGORY T ANDERSON                           | <del> </del> | 5353 97TH STREET CIRCLE E   |
| Add   |                          |   |  |              | BRADENTON, FL 34211   |
| Remove  |                          |   |  |              |   |
| 2) Change   |                          | _                                       |  | <u> </u>     | <del></del>   |
| Add   |                          |   |  |              |   |
| Remove  |                          |   |  |              |   |
| 3) Change   |                          | _                                       |  | <del> </del> | <del></del>   |
| Add   |                          |   |  |              |   |
| Remove  |                          |   |  |              |   |
| 1) Change   |                          |   | -w-e-  |              | - <u></u>   |
| Add   |                          |   |  |              |   |
| Remove  |                          |   |  |              | <del></del>   |
| 5) Change   |                          |   |  | <u> </u>     |   |
| Add   |                          |   |  |              |   |
| Remove  |                          |   |  |              |   |
| 6) Change   |                          | _                                       |  | <u> </u>     |   |
| Add   |                          |   |  |              |   |
| Pamoua  |                          |   |  |              |   |

| E. If amending or adding additional Articles, enter change(s) here:                                 |                             |
|---|-----------------------------|
| (Attach additional sheets, if necessary). (Be specific)   |                             |
| NA  |                             |
|   |                             |
|   |                             |
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|   |                             |
| F. If an amendment provides for an exchange, reclassification, or can                               | cellation of issued shares, |
| provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A) | e amendment itself:         |
| NA  |                             |
|   |                             |
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