

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000187928 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)617-6380

Account Name

: FASTKIT CORPORATE OUTFITS

Account Number: 071001002335

Phone : (305)599-0839

: (305)716-0346

Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

DIGIMEDIA CONTENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment Articles of Incorporation of

			00	^
, 7	Articles of Amendme	ent	ASC A	% ^/
	to	· ·	To the second	~ \\\\\
_	Articles of Incorporat of	ЮП	74.4/A	L Pry
(Name of Chrogation as curr	contly filed with the Plant	de Port of State)	- -	CALLANDISS STATE
Dogoo		un pept of state)		POS.
(Document Nur	mber of Corporation (if kn	own)	- ,	7
	• • •	•	4	•
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	o, rionda Statutes, this i	riorida Profit Corpora	non adopts the follow	ring
	# ati a			
A. If amending name, enter the new name o	1 the cornoration:			•
many hardeness to help and	ald IIdan I	· · · · · · · · · · · · · · · · · · ·	The new	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the				
name must contain the word "chartered," "pro-	fessional association," or	the abbreviation "P.A.	, i	
B. Enter new principal office address, if app	ilicable:	* **		
(Principal office address MUST BE A STREE				
			<u>-</u>	•
				
C. Enter new mailing address, if applicable	<u> </u>		:	
(Mailing address MAY BE A POST OFFI	CE BOX)			
·				
D. If amending the registered agent and/or r	egistered office address i	n Florida, enter the na	me of the	
new registered agent and/or the new regis				
Name of New Registered Agent:				
				•
New Registered Office Address:	(Florida street a	address)		
		, Florida	2	
-	(City)	(Zip Code)	<u> </u>	
New Registered Agent's Signature, if changin	o Registered Agent			
I hereby accept the appointment as registered as	gent. I am familiar with a	nd accept the obligation	rs of the position.	

Page 1 of 3

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) Name <u>Address</u> Type of Action ☐ Add Remove 🗆 Remove DDA [☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reglassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)

The date of each amendment(s)	adoption: 8/24/09
Effective date if applicable:	(diate of adoption is required)
	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	at for the amendment(s) was/were sufficient for approval
by	oting group)
(ਅ	oting group)
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 8/6	24/09
Signature	Vanko in and by
(By a d	irector, president or other officer — if directors or officers have not been i, by an incorporator — If in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
<u>(</u>	Charles M. Diveto dr. (Typed or printed name of person signing)
- -	Title of person signing)