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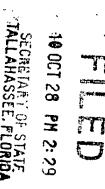




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COTENDEDIES

TO: Amendment Section Division of Corporations	÷	•
NAME OF CORPORATION: Nika Za	se Corporation	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: PIGOOD	666726	
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
Jonathan (Name of Contact Person	<u>.</u>
Nikazore Copp	Poration Firm/Company	
18495 S.D:	xie hwy #252 Address	?
Cotter Bay	FL 33157 City/ State and Zip Code	
E-mail address: (to be us	rediction. COM sed for future annual report notification)	
For further information concerning this matter	r, please call:	
Sonathan Corcoran Name of Contact Person	at (<u>305</u>) <u>878-</u> Area Code & Daytime Tel	6382 ephone Number
Enclosed is a check for the following amount	made 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)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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to

Articles of Incorporation

of

(Name of Corporation as currently filed with the Florida Dept. of State)

N. Kuzoe COTO # Plagagggg726 (Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Media Zoe Corporation The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation
name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE X POST OFFICE BOX)
P. C. agents
22
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
75 2
Name of New Registered Agent:
* "
New Registered Office Address: (Florida street address)
, Florida
(City) (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
.J

Page 1 of 3

Auacn aaau		ch Officer and/or Director being	<u>added:</u>			
	Attach additional sheets, if necessary)					
<u>l'itle</u>	<u>Name</u>	Address	Type of Action			
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		ange, reclassification, or cancellat				
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	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
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 d 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/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_\0	24/10
sele	a director, president or other officer – if directors or officers have not been coted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Tonathan (orcoran) (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Title of person signing)