## P10000033396

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C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section

Division of Corpo	rations			
NAME OF CORPOR	ation: Tud er: 900000	ES PHOTOGR	APHY INC	
DOCUMENT NUMB	er: <u>A00000</u>	33396		
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:		
	Edwa	ard J Jord		
•	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1	
		TAX NERD		
-	Firm/ Company			
	81	5 NE 19th 7	eR	
-		Address		
	ft	Lauderdale	er FL 33304	
-		City/ State and Zip Cod		
	1 11	1	( - , A   , A , M	
	10 40	tax6RouP @	GMAIL.COM	
	E-man address. (to be de	sed for future annual report	Hotification)	
For further information	concerning this matter, pleas	se call:		
EdWAR	ed J JORDA	at ( 954	de & Daytime Telephone Number	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
<u>Mail</u>	ing Address		Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327			Division of Corporations Clifton Building	
	hassee, FL 32314	2661 E	Executive Center Circle	
		Tallaha	assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

## TUNES PHOTOGRAPHY INC (Name of Corporation as currently filed with the Florida Dept. of State)

90000	33396		
	nent Number of Corporation (if k	nown)	—·
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Co</i>	rporation adopts the following	; amendment(s)
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the wor "Corp" "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A profession	or "incorporated" or the abound corporation name must co	breviation ontain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			···
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<b>9X</b> 1	ana Mari	<b>P</b> 2
manag mures <u>mares per out the be</u>	<u> </u>		
		جر	
		<u> </u>	<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered		ater the name of the	
			၌ တေ့ 💃
Name of New Registered Agent		<del>二</del>	23
	(Florida street address)	11.	
New Registered Office Address:		, Florida	
, , , , , , , , , , , , , , , , , , ,	(City)	(Zip Co	ode)
New Registered Agent's Signature, if changing Reg	pistered Agent:		
I hereby accept the appointment as registered agent.	I am familiar with and accept th	e obligations of the position.	
Sion	ature of New Registered Agent, i	f 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)

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	PD	JOHN ANTHNES	510 NW 84th AUC #542
<u> </u>			PLANTATION FL 33324
Remove			
2) Change	PD	STEPHANIE ANTUNES	510 NW 84 KM Ave # 542
Add			PLANTATION FL 33324
X Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary	). (Be specific)			
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an amendment provides for an ex rovisions for implementing the ar	change, reclassification	or cancellation of	issued snares,	
(if not applicable, indicate N/A)	menament ii not contsin	eu in the amendme	iii iiscii.	
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N/A				
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The date of each amendment(s) ado date this document was signed.	ption:, 11	other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ock does not meet the applicable statutory filing requirements, this date will not artment of State's records.	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated3	Menic Katures	
Signature X	Meni Later	
(By a dire	Sector, president or other officer – if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed	d fiduciary by that fiduciary)	
_	STEPHANIE ANTUNES	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	