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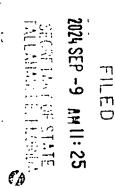
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

MIAMI MEDIA AND FILM MARKET INC. NAME OF CORPORATION:
P10000048999
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Patricia Arias
(Name of Contact Person)
MIAMI MEDIA AND FILM MARKET, INC.
(Firm/ Company)
1401 W. Flagler Street
(Address)
Miami. FL 33135
(City/ State and Zip Code)
patricia@camacol.org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Patricia Arias 305-807-7923 at
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\square\

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MIAMI MEDIA AND FILM MARKET INC

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
P10000048999		
(Document N	lumber of Corporation (if known	own)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
N/A		The new
name must be distinguishable and contain the word "cor, "Company" or "Co." may not be used in the name.	poration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR.	ESS)	
		-
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		702 202
(mailing dauress MAT DE ATOST OTTEL BOX)		LA SE
		
D. If amending the registered agent and/or registered	l office address in Florida,	enter the name of the
new registered agent and/or the new registered off		97.4 97.4 97.4 97.4 97.4 97.4 97.4 97.4
N/A Name of New Registered Agent:		A Sun M
		*,"
N D 34444 1096 4 House	(Flo	rida street address)
New Registered Office Address:		
	(City)	Florida (Zip Code)
	(City)	(Σιρ Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	t <mark>ered Agent:</mark> am familiar with and accept t	he obligations of the position.
	Signature of New Registe	red Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name	ne,
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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add		N/A	
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add nt until a su	ccessor is	s appointed by he Board of Directors.	
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
		garez as Treasurer is hereby removed due to his pass	sing. This position shall remain
vacant until a successor	is appoir	ited by the corporate officers.	
			
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The date of each amendment(s) adoption:					if other than th
ate this document was signed.					_,
N/A					
ffective date <u>if applicable</u> :	more than OA days	after amondmen	t file date)		
(no)	more man 90 aays	анет атепатеп	i jiie aaie)		
Note: If the date inserted in this block does no	t meet the applica	ble statutory filin	g requirements, th	is date will not l	be listed as the
locument's effective date on the Department o	f State's records.	•	- •		

(CHECK ONE)

Adoption of Amendment(s)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	28/2024
have not been sele	or vice chairman of the board, president or other officer-if directors lected, by an incorporator – if in the hands of a receiver, trustee, or nted fiduciary by that fiduciary)
•	forcia linias
	(Typed or printed name of person signing)
	C.FO
	(Title of person signing)