P10000052530

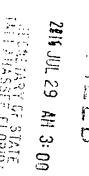
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Office Use Only



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AUG 0 5 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	MULTVIDEO PR	ODUCTIONS INC						
DOCUMENT NUMB	DOCUMENT NUMBER: P10000052530							
The enclosed Articles	of Amendment and fee are su	bmitted for filing.						
Please return all corres	pondence concerning this ma	tter to the following:						
	GUILLERMO MARTINEZ							
	Name of Contact Person							
	FREUND KATZ GOLDSTON YOUNG PA							
•	Firm/ Company							
	10729 SW 104TH STREET							
•		Address						
	MIAMI, FLORIDA 33176							
•		City/ State and Zip Code						
GMA	RTINEZ@TAX-DOCTOR.N	IET						
	E-mail address: (to be us	sed for future annual report r	notification)					
For further information	concerning this matter, please	se call:	. 279-1288					
Name o	of Contact Person		e & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:								
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy -is-enclosed)					
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Division Clifton I 2661 Ex	nent Section a of Corporations					

850-245-6050

Articles of Amendment to Articles of Incorporation of

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(Name	of Corporation as curren	tly filed with the Florida Dept. of	State)	
P10000052530				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts	the following an	nendment(s) to
A. If amending name, enter the new n 2 B PRODUCTIONS GF			Th	e new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design	nation "Corp," "Inc," or	"Co". A professional corporation	d" or the abbre	eviation
word "chartered," "professional associa B. Enter new principal office address,		"P.A." 6941 N.W. 82ND AVENUE		_
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		MIAMI, FLORIDA 33166	13.5	
				e-speig
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	6941 N.W. 82ND AVENUE	STATE LORID		
		MIAMI, FLORIDA 33166	jų.	
D. If amending the registered agent an new registered agent and/or the ne			the	
Name of New Registered Agent	GUILLERMO MARTIN		_	
	10729 SW 104TH STRE	ET	 -	
	(Florida s MIAMI	treet address)	33176	
New Registered Office Address:	(City)		Florida (Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agen	t ;		
I hereby accept the appointment as regis			he position.	
		_		

Page 1 of 4

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)

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:	e, and Sai	ly Smith,	SV as an Add.					
X Change	<u>PT</u>	John Do	John Doe					
X Remove	<u>v</u>	Mike Jo	Mike Jones					
_X Add	<u>sv</u>	Sally Smith						
Type of Action (Check One)	<u>Title</u>		Name	Address				
1) X Change	PTD		DENIZE TAGNIN	6941 N.W. 82ND AVENUE				
Add				MIAMI, FLORIDA 33166				
Remove								
2) Change	PTD	_	SERGIO P. FERNANDES-MATTO\$0	7278 N.W. 58TH STREET				
Add				MIAMI, FLORIDA 33166				
X Remove								
3) Change		- _						
Add								
Remove								
4) Change		_						
Add								
Remove								
5)Change		_						
Add								
Remove								
6) Change		_						
Add								
Remove								

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
NONE			
		<u></u>	
provis	amendment provides for an exchange, reclassification, or cancellation of issued shan isions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	·es,	
NONE			
			

JULY 28,	2016
	, if other than the
date this document was signed.	
JULY, 28, 2016	
Effective date if applicable:	ore than 90 days after amendment file date)
(no m	ore inan 90 days after amenament fite date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK C	ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	
☐ The amendment(s) was/were approved by the shareh must be separately provided for each voting group	olders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	
by(voting gro	,"
(voting gro	<u>шр)</u>
☐ The amendment(s) was/were adopted by the board of action was not required.	
☐ The amendment(s) was/were adopted by the incorporaction was not required.	rators without shareholder action and shareholder
Dated 7-28-29/4	<u>6</u>
(By a director, president or	other officer - if directors or officers have not been
	r - if in the hands of a receiver, trustee, or other court
appointed fiduciary by tha	fiduciary)
DFN 1 2	E TAGAVAL
(Typed	or printed name of person signing)
PRESIDENT	
	(Title of person signing)