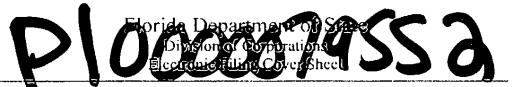
8/7/2019

Division of Corporations



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.

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone

: (323)962-8600 : (323)962-3889

Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

| Email | Addr | ess: |
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COR AMND/RESTATE/CORRECT OR O/D RESIGN 7 VEILS MEDIA, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 05 |
| Estimated Charge | \$43.75 |

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Help

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|---|---|--|--|
| NAME OF CORPORATION: 7 VEILS MEDIA | INC. | · | |
| DOCUMENT NUMBER: P10000079552 | . | | |
| The enclosed Articles of Amendment and fee are so | ibmitted for filing. | | |
| Please return all correspondence concerning this ma | atter to the following: | | |
| Cheyenne Moseley | | | |
| | Name of Contact Perso | 9 | |
| LegalZoom.com, Inc. | | | |
| | Firm/ Company | | |
| 101 N. Brand Blvd., 11th I | Floor | | |
| | Address | | |
| Glendale, CA 91203 | | | |
| | City/ State and Zip Cod | c | |
| lauren@7veils.com | | | |
| _ | sed for future annual report | notification) | |
| For further information concerning this matter, plea | se call: | | |
| Cheyenne Moseley | at (800 | 773-0888 ext. 9724 | |
| Name of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for the following amount made | payable to the Florida Dep | artment 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 | Street | Street Address | |
| Amendment Section | | Iment Section | |
| Division of Corporations | Divisio | on of Corporations | |
| P.O. Box 6327 | Clifton | Building | |
| Tallahassee, FL 32314 | 2661 b | executive Center Circle | |

Tallahassee, FL 32301

| Articles of A | Amendment | |
|--|---|-------------|
| | 0 , | |
| | ncorporation | |
| · | of | |
| 7 VEILS M | IEDIA, INC. | |
| (Name of Corporation as currently filed with the | Florida Dept. of State) | |
| P10000 | 0079552 | |
| (Document Number of Corporation | (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | s Florida Profit Corporation adopts the following amend | dment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| | The o | new |
| name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain | |
| B. Enter new principal office address, if applicable: | 140 Laker Dr. | |
| (Principal office address MUST BE A STREET ADDRESS) | Corrales, NM 87048 | 2019 |
| | | AUG |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 140 Laker Dr. | -7 |
| produced the second sec | Corrales, NM 87048 | A |
| | | — ⇔ €= |
| D. If amending the registered agent and/or registered office aden new registered agent and/or the new registered office addre- | dress in Florida, enter the name of the | 0 |
| new registered agent andror the new registered office source | <u>35.</u> | |
| Name of New Registered Agent | | |
| | | |
| (Florida s | street address) | |
| (Florida s New Registered Office Address: | Florida | |

Signature of New Registered Agent, if changing

Page 5 of 7

Example:

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:

 $P \sim President; V \sim Vice President; T \sim Treasurer; S \sim Secretary; D \sim Director; TR \sim Trustee; C \sim Chairman or Clerk; CEO \sim Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

| X Change | <u> 174</u> | John Doc | |
|-------------------------------|--------------|----------------|--------------------------|
| X Remove | Y | Mike Jones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) K Change | SD | Lauren MacEwen | 3811 Rio Grande Blvd. NW |
| Add | | | Albuquerque, NM 87107 |
| Remove | | | |
| 2) Change | PT | Alex Lecomte | 140 Laker Dr. |
| X Add | | | Corrales, NM 87048 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | · · |
| - | | | |
| 61 Change | | | |
| Add | | | |
| Kemove | | | |

| Attach additional sheets, if necessary). (Be specific) | |
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| | The state of the s |
| f an amendment provides for an exchange, reclassification, | or cancellation of issued shares. |
| provisions for implementing the amendment if not contained | or cancellation of issued shares, ed in the amendment itself: |
| If an amendment provides for an exchange, reclassification, provisions for implementing the amendment if not contains (if not applicable, Indicate N/A) | or cancellation of issued shares, ed in the amendment itself: |
| provisions for implementing the amendment if not contains | or cancellation of issued shares, and in the amendment itself: |
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| provisions for implementing the amendment if not confaint | or cancellation of issued shares. ed in the amendment itself: |
| provisions for implementing the amendment if not confaint | or cancellation of issued shares. ed in the amendment itself: |

| The date of each amendment(s) adoption: 7/11/2019 | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date if applicable: | |
| (no more than 90 days after amendment file date) | - |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 7-29-19 | |
| Signature | |
| (By a director, president or other officer – if directors or officers have not been | _ |
| selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| Lauren MacEwen | _ |
| (Typed or printed name of person signing) | |
| Secretary | |
| (Title of person signing) | - |