P11000022499

(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Name)
(Docur	nent Number)	
Certified Copies	Certificates o	f Status
Special Instructions to Fili	ng Officer:	
:		

Office Use Only



200297890292

04/18/17--01008--013 **35.00



1/00

COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

24.

Division of Corporations NAME OF CORPORATION: ____ Epiksol Creative, Inc. P11000022499 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: Daniel Campo Name of Contact Person Nine Arc Corporation Firm/ Company 17581 SW 138TH CT Address Miami, FL 33177 City/ State and Zip Code legal@ninearc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 219-6228

Area Code & Daytime Telephone Number Daniel Campo Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as of	currently filed with the Florida Dept. of State)
P11000022499	
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the corpora	ntion:
Vine Arc Corporation	The _gew
	prporation," "company," or "incorporated" or the abbrevi <mark>ation</mark> ac," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>	
Enter new mailing address, if applicable:	がで N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
 If amending the registered agent and/or registered off new registered agent and/or the new registered office 	
N/Δ	nduress.
Name of New Registered Agent NA	
TORING OF THE INCLUSION ON TILGIN	
	lorida street address)
	Clorida street address) , Florida N/A (City) (Zip Code)

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>	Address
1) Change			
Add		<i>)</i> -	<u>/</u>
Remove			
2) Change		_\	
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_ /	
Add			\
Remove			
6) Change			
Add		-	
Remove		-	
	/	Page 2 of 4	

If amending or adding a Attach <i>additional sheets</i> ,	if necessary). (Be	e specific)	<u>v</u> .	
4				/
			Hara a · ·	
`				
·				
		•	"	

	$\overline{}$		<u> </u>	
	`			
1				
				· · · · · · · · · · · · · · · · · · ·
		$\overline{}$		
		\	/	
		/	\	· · · · · · · · · · · · · · · · · · ·
f an amendment provid	es for an exchange	, reclassification, o	cancellation of ssued	shares,
f an amendment provided provisions for implementations for implementations.	nting the amendme	ent if not contained	in the amendment itse	<u>lf:</u>
(if not applicable, ir	dicate N/A)	/	\	\
	/			
	/			
				•

The date of each amendment(s) ac date this document was signed.	loption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voling group)
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
4/01/2017 Dated	
Signature	200
	rector, president or other officer—if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court
	ed fiduciary by that fiduciary)
	Daniel Campo
	(Typed or printed name of person signing)
	President
	(Title of person signing)