P11000085791

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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ONE MARKETIN	G INC.		
DOCUMENT NUMI	P11000085791			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	•	
Please return all corre	spondence concerning this ma	tter to the following:		
	Marc Cerniglia			
	Spotlight Branding Inc.	Name of Contact Person	1	
	15905 Brockway Dr., Suite 4	Firm/ Company 209		
	Huntersville, NC 28078	Address		
		City/ State and Zip Cod	е	
marc	@spotlightbranding.com			
·	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Marc Cerniglia		800 at (406-7229	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ONE MARKETING INC.			
(<u>Name of Corpora</u> P11000085791	tion as currently filed wit	h the Florida Dept, of State)
(Docu	ment Number of Corporati	on (if known)	
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this <i>Florida Pr</i>	ofit Corporation adopts the f	following amendment(s) to
A. If amending name, enter the new name of the of SPOTLIGHT BRANDING INC.	corporation:		599
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp.	p," "Inc," or "Co". A p.		
word "chartered," "professional association," or th B. Enter new principal office address, if applicab			10000000000000000000000000000000000000
(Principal office address <u>MUST BE A STREET AD</u>			SON PO
	,, 		15 TO
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>ox</u>)		
D. If amending the registered agent and/or regist- new registered agent and/or the new registered		rida, enter the name of the	
Name of New Registered Agent			
	(Florida street address))	,
New Registered Office Address:	(City)	, Florida_	(Zip Code)
New Registered Agent's Signature, if changing Relative I hereby accept the appointment as registered agent.		ccept the obligations of the po	osition.
Sia	nature of New Registered A	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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change			· · · · · · · · · · · · · · · · · · ·	
Add	,			
Remove				
3) Change		_		
Add				
Remove				
4) Change		·······		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional s	ding additional Ar heets, if necessary)	. (Be specific))			
						
				et plane a men et de minure de la mentale		
If an amendment provisions for imp	provides for an exc plementing the am ble, indicate N/A)	hange, reclassi	fication, or car contained in th	ncellation of issume amendment i	ued shares, tself:	
						
			•			

date this document was signed.
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
03/06/2017
Dated
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)
Marc Cerniglia
(Typed or printed name of person signing)
Vice President
(Title of person signing)