P12000010823

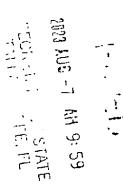
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	ORPORATION: MA Sutio Inc.						
	NUMBER: P12000010823						
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return al	l correspondence concerning this m	atter to the following:					
	DeBorah Barrett						
		Name of Contact Persor	1				
	M A Studio Inc.						
		Firm/ Company					
	1415 2nd Street						
		Address	-				
	Sarasota, Florida 34236						
		City/ State and Zip Code	e e				
	deswave8@gmail.com						
	E-mail address: (to be u	ised for future annual report	notification)				
For further info Deborah Barret	rmation concerning this matter, plea	ase call:at (908	902-9740				
	Name of Contact Person	Area Co	de & Daytime Telephone Number				
	neck for the following amount made						
■ \$35 Filing	Fee S43.75 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 Tallahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303				

Articles of Amendment to Articles of Incorporation of

M A Studio Inc.		
(<u>Name</u>	of Corporation as current	tly filed with the Florida Dept. of State)
P12000010823		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
	Corp, " "Inc, " or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address,	if applicable:	Deborah Barrett
(Principal office address MUST BE A S		1415 2nd Street Suite 421
		Sarasota, Florida 34326
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Deborah Barrett
		1415 2nd Street Suite 421
		Sarasota Floirida 34236
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	Deborah Barrett	<u>s:</u>
	1415 2nd Street Suite 421	
	(Florida st	reet address)
New Registered Office Address:	Sarasota	Florida 34236
new regions of trypics interests.		(City) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agen	
i nereoy accept the appointment as regis) charach.	with and accept the obligations of the position. Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PS	Deborah Barrett	1415 2nd Street Suite 421
X Add			Sarasota Florida 34236
Remove			
2) Change			
Add			
X Remove Change	PS	Michael Anthony	Welaka, Florida 32193
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change		_	=
Add			
Remove			
6) Change		_	
Add			
Remove			

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••		7.27
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	, ; (
(if not applicable, indicate N/A)	<u> </u>	7
the day of July 13th, 2023, M.A. Studio	herby transfers all (100%) of its stock to Deborah Barrett	A Charles
ocated at 1415 2nd Street suite 421, Saras	ota, Florida 34236	_
ll physical assets and inventory ARE incl	uded in this stock transfer	٠ اعدر ا
•	Michael Anthony personally, and is NOT included in this transaction including	723
Il intellectual property will remain with !		
	s, brands, phone numbers, trade dollars and tax credits up to 12/31/2022	_

July 13th 2023	
The date of each amendment(s) adoption:	than the
Effective date if applicable:	
(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 list document's effective date on the Department of State's records.	ed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	г
☐ 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	
by	
July 13th	
Dated	
Si	
(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) Dedorah Barrett	
(Typed or printed name of person signing)	(1993)
President	E,
(Title of person signing)	ئ