## P12000042187

(Red	questor's Name)	
(Add	dress)	<u>.</u>
(Add	dress)	
(City	y/State/Zip/Phone i	<del>#</del> )
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Name	e)
(Doc	cument Number)	
Certified Copies	_ Certificates of	of Status
Special Instructions to I	Filing Officer:	

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12/26/12--01050--011 \*\*35.00

Amend

JAN - 4 2013

T. BROWN

## **COVER LETTER**

TO: Amendment Section Division of Corporations

AME OF CORPORATION: Total Horse Channel				
OCUMENT NUMBER: P12000043187				
The enclosed Articles of Amendment and fee are submitted for filing.				
ease return all correspondence concerning this matter to the following:				
Colleen Patton				
Name of Contact Person				
Total Horse Channel				
Firm/ Company				
1601 Sw 27th Ave #500				
Address				
$\frac{OCala FL 31471}{City/State and Zip Code}$				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Colleen Patton at (404) 827-8340				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  Capture Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

12 OEC 26 PH 3: 30

## Articles of Amendment to Articles of Incorporation

of 3.
Total Harse Channel INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P12000043187
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  1601 Sw 27 <sup>th</sup> Ale
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  DCC   a FL 34477-3011
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:
Name of New Registered Agent Collect (Hatton)  16015w 27th Ave 502  (Florida street address)
New Registered Office Address: OCG a Florida 34471  (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

X Change	<u>PT</u> <u>Joh</u>	n Doe		
X Remove	<u>V</u> <u>Mil</u>	te Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) X Change	PVTS	Colben Path		Ave
			209	
Remove			Ocala fl 3	<u>5947</u> 1
2) Change	P	Janeen SCr		<del>1</del> 300
Add			Un'+17	
X Remove			oxala EL 3	
3) Change	VP_	Timothyno	12/2016 8585 SW	Huy 200
Add			Uni+17	
Remove			Ocala FC 3	1481
4) Change				
Add			<del> </del>	<u> </u>
Remove			<del></del>	
5) Change				<del>.</del>
Add			<del> </del>	<del></del>
Remove				<u> </u>
6) Change				<u> </u>
Add				
Remove				

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)
······································	
	<del></del>
provisions for implementing the amer (if not applicable, indicate N/A)	
longer asso	xicted with Total
Horse Char	nel Inc.

The date of each amendment(s) adoption:	10/15/12
Effective date if applicable:	10/15/12
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CF	ECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval
by	"
(vo	ting group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated_10/15/	2
Signature (By a director, pres	sident or other officer – if directors or officers have not been
selected, by an inc appointed fiduciar	orporator – if in the hands of a receiver, trustee, or other court y by that fiduciary)
Col	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	resident
	(Title of person signing)