

P12000088143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

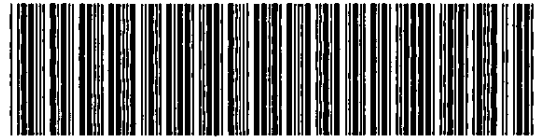
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 20 2013

R. WHITE

FILED
13 JUN 20 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2013

JUAN F ORDONEZ
MOVEMENT PRODUCTIONS INC
7556 SW JACK JAMES DRIVE
STUART, FL 34997 US

SUBJECT: MOVEMENT PRODUCTIONS INC
Ref. Number: P12000088143

We have received your document for MOVEMENT PRODUCTIONS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

ON PAGE 4, A SIGNATURE IS REQUIRED BY A DIRECTOR, PRESIDENT OR OTHER OFFICER ACCEPTING THE ADOPTION OF AMENDMENTS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist

Letter Number: 913A00012421



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2013

JUAN F ORDONEZ
MOVEMENT PRODUCTIONS INC
7556 SW JACK JAMES DRIVE
STUART, FL 34997 US

SUBJECT: MOVEMENT PRODUCTIONS INC
Ref. Number: P12000088143

RECEIVED
13 JUN 20 PM 1:04
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for MOVEMENT PRODUCTIONS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Rebekah White
Regulatory Specialist

Letter Number: 913A00012421



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2013

JUAN F ORDONEZ
MOVEMENT PRODUCTIONS INC
7556 SW JACK JAMES DRIVE
STUART, FL 34997 US

SUBJECT: MOVEMENT PRODUCTIONS INC
Ref. Number: P12000088143

We have received your document for MOVEMENT PRODUCTIONS INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist

Letter Number: 513A00010018

RECEIVED
13 MAY 13 AM 10:53
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2013

JUAN F ORDONEZ
MOVEMENT PRODUCTIONS INC
7556 SW JACK JAMES DRIVE
STUART, FL 34997 US

SUBJECT: MOVEMENT PRODUCTIONS INC
Ref. Number: P12000088143

We have received your document for MOVEMENT PRODUCTIONS INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist

Letter Number: 513A00010018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Movement Productions Inc

DOCUMENT NUMBER: P12000088143

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan F Ordonez

Name of Contact Person

Movement Productions Inc

Firm/ Company

7556 SW Jack James Drive

Address

Stuart, FL. 34997

City/ State and Zip Code

keepitmvmnt@lcloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan F ordeonez

Name of Contact Person

at (718) 753-9800

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

13 APR 24 AM 9:13

Articles of Amendment
to
Articles of Incorporation
of

Movement Productions Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000088143

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** 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**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Please Add My company's Federal Id number.

It is 46-1215604

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: April 18, 2013

Effective date if applicable: April 1, 2013

(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 April 18, 2013

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)

Juan F Ordonez

(Typed or printed name of person signing)

President

(Title of person signing)