## D/300000/3/63

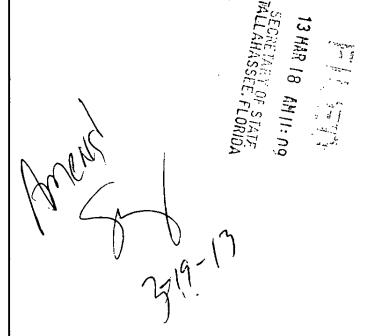
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: RESCUE MEDIA GROUP, INC
DOCUMENT NUMBER: P13000013163
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
EDDIE OLAVARAIT TR  Name of Contact Person  RESUE MEDIA GROSP IN C  Firm/ Company
Name of Contact Person
RESUE MEDIA GROYP INC
Firm/ Company
13027 124th Avo
LARGO FL 3377 Address
City/ State and Zip Code
EDOLAVARRIA@GMAIL, IDM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
EOOIE OLAVAGUA TR at (404) 443 - 1667  Name of Contact Person Area Code & Daytime Telephone Number
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:
N.1
\$35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
2

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## **Articles of Amendment**

to

Articles of Incorporation

RESCUE MEDIA GROW	IP INC		MECAGIAS Y	COR - 11: ng
. (Name of Corporation as curren	tly filed with the Fl	orida Dept. of State)	1000	E. F. STATE
P13000013163				ORIDA
(Document Numb	per of Corporation (if	`known)		
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this I	Florida Profit Corpora	ntion adopts the following	g amendment(s) t
A. If amending name, enter the new name of t	the corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp," "Inc," or "C	Co". A professional c	eorporation name must c	contain the
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET		**		. '
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>E BOX</u> )			_
			***	-
				-
D. If amending the registered agent and/or re new registered agent and/or the new regist			the name of the	
Name of New Registered Agent				
	(Florida stro	eet address)	<del></del>	•
New Registered Office Address:	·	, I	Florida	-
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as paistered ag			ligations of the position.	
Signature	of New Registered A	lgent, 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>РТ</u>	John Doe	
X Remove		Mike Jones	
	<u>V</u>		
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	ELIZABÉTH LRUZ	13027 DY ANC
X Add			Largo ,FL 33774
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<del></del>	
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5) Change			
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6) Change			
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	icles, enter change(s) here:  (Be specific)
	ARTANA TO THE
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, undment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption:	3-11-17
Effective date <u>if applicable</u> : (no more tha	in 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	
"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 direct action was not required.  The amendment(s) was/were adopted by the incorporators was not required.	
	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary	ary)
EDDIF ÖLAUARA (Typed or print	ted name of person signing)
PRESIDENT	rson signing)