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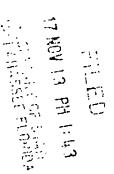


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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: KAY-ZER MEDIA	A INC				
DOCUMENT NUM	BER: P13000018506					
	s of Amendment and fee are su	ibmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Sibel Dag					
	Name of Contact Person					
	KAY-ZER MEDIA INC					
		Firm/ Company	-			
	511 West Virginia St.					
	Address					
	Tallahassee FL 32301					
		City/ State and Zip Code	;			
1	172 O 1					
nuho	173@gmail.com	-10.0				
	E-maii address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Sibel Dag		at (850	3000335			
Name	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:			
S35 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)			
Am Div	iling Address endment Section ision of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

KAY-ZER MEDIA INC.				
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dep	it. of State)	
P13000018506				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation a	idopts the following amending	ient(s) to
A. If amending name, enter the new na	ame of the corporation:			
			The ne	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	"Co". A professional corpor	orated" or the abbreviation	n
R. Enter new principal office address	if applicable:	511 West Virginia St.		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		Tallahassee FL 32301		
			مــــــــــــــــــــــــــــــــــــ	
			- 3	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		511 West Virginia St.		
		Tallahassee FL 32301	SE SE	
				 د
 If amending the registered agent ar new registered agent and/or the ne 			me of the	
	Sibel Dag	30.		
Name of New Registered Agent			<u></u>	
	511 West Virginia St.			
		treet address)	22201	
New Registered Office Address:	Tallahassee		_, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c	honging Registered Agen	•••		
I hereby accept the appointment as regis			rs of the position.	
	Stutte	_		
	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, 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	D	-	Sibel Dag	511 West Virginia St.
x Add				Tallahassee FL 32301
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u>-</u>		
Add				
Remove				
Charac				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
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	<u></u>	
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		 .
F If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
Sibel Dag is the owner of 200 shares		
	100	
		-
		
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· · · · · · · · · · · · · · · · · · ·		

	3/15/2017		
The date of each amendment(s) ad	option:		, if other than the
date this document was signed.	•		
3/15/.	2017		
Effective date if applicable:	(no more i	than 90 days after amendment file date)	 ;
	(man to days after americanem fre acacy	
Note: If the date inserted in this bl document's effective date on the Dep		e applicable statutory filing requirements, this ords.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	D	
The amendment(s) was/were adop by the shareholders was/were suf		rs. The number of votes cast for the amendmen	nt(s)
		ers through voting groups. The following state tled to vote separately on the amendment(s):	ment
	•	vas/were sufficient for approval	
by		·"	
,	(voting group)		
action was not required.		rectors without shareholder action and shareho	lder
·			
1 ₫ /29/2017			
Dated			
Cianatura			
Signature	ector president or othe	er officer – if directors or officers have not bee	
		if in the hands of a receiver, trustee, or other co	
	d fiduciary by that fidu		7411
		1.10	
ľ	Nuh Dag	Hull 1	
-	(Typed or pr	rinted name of person signing)	
	· ·		
-	President.	·	
	((Title of person signing)	