# P1300036569

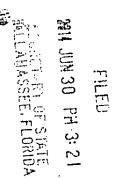
| (Re                     | equestor's Name)  | . <del></del> - |
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| (Cit                    | ty/State/Zip/Phon | e #)            |
| PICK-UP                 | ☐ WAIT            | MAIL            |
| ,<br>(Bu                | siness Entity Nar | me)             |
| (Do                     | cument Number)    |                 |
| Certified Copies        | _ Certificates    | s of Status     |
| Special Instructions to | Filing Officer:   |                 |
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Office Use Only

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#### **COVER LETTER**

4

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORA                               | ATION: HVDS Multi   | media Inc.   |                     |   |
|---|---|--|---------------------|---|
| DOCUMENT NUMBI                                | P13000036569  | 9  |                     |   |
|   | f Amendment and fee are sub   |  |                     |   |
| Please return all corresp                     | ondence concerning this mat   | er to the following  | g:                  |   |
|   | Jessica Aguilera  |  |                     |   |
| _   | <del></del>   | Name of Contac   | et Person           |   |
| I   | HVDS Multimedia   | Inc.   |                     |   |
| _   |   | Firm/ Com  | pany                |   |
| ;   | 3201 Griffin Road   | , Suite 104  |                     |   |
| _   |   | Address  | s                   |   |
| 1   | Fort Lauderdale, I  | FL 33312   |                     |   |
| •   |   | City/ State and 2  | Zip Code            |   |
| iess  | ica@hvdsmedia.e   | com  |                     |   |
| <u>, , , , , , , , , , , , , , , , , , , </u> | E-mail address: (to be us   |  | al report n         | otification)  |
|   |   |  |                     |   |
| For further information                       | concerning this matter, pleas   | e call:  |                     |   |
| Jessica Aguile                                | era   | at (95   | 54                  | 963-9551  |
| Name o  | f Contact Person  | Area Code & Daytime Telephone Num                                |                     | e & Daytime Telephone Number  |
| Enclosed is a check for                       | the following amount made p   | ayable to the Flori  | ida Depar           | tment of State:   |
| □ \$35 Filing Fee                             | □\$43.75 Filing Fee & Certificate of Status                               | \$43.75 Filing<br>Certified Copy<br>(Additional co-<br>enclosed) | y                   | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame<br>Divis<br>P.O.                          | ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314 |  | Division<br>Clifton | Address ment Section n of Corporations Building secutive Center Circle                |

Tallahassee, FL 32301



## RECEIVED 14 JUN 30 PM 4:50

### FLORIDA DEPARTMENT OF STATE

Division of Corporations

June 9, 2014

Jessica Aguilera HVDS Multimedia Inc 3201 Griffin Road, Ste 104 Ft. Lauderdale, FL 33312

SUBJECT: HVDS MULTIMEDIA INC

Ref. Number: P13000036569

We have received your document for HVDS MULTIMEDIA INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Page 4 of the amendment form was left blank.

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.

Annette Ramsey Regulatory Specialist II

Letter Number: 714A00012388

### Articles of Amendment Articles of Incorporation of

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|---|----|----|--|
|   |    |    |  |

**HVDS Multimedia Inc.** 

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

314 HIN 30 PM 3: 21 STATE PLORIDA

dment(s) to

| P13000036569   |                                 |                              | nall ASS   |  |
|--|---------------------------------|------------------------------|--|--|
| (Docume  | nt Number of Corporation (if    | known)                       | 119.   |  |
| ursuant to the provisions of section 607 s Articles of Incorporation:  | .1006, Florida Statutes, this F | lorida Profit Co             | rporation adopts the following                                   |  |
| . If amending name, enter the new n  | ame of the corporation:         |                              |  |  |
| ame must be distinguishable and con<br>Corp.," "Inc.," or Co.," or the design<br>ord "chartered," "professional associa                      | ation "Corp," "Inc," or "C      | o". A professio              |  |  |
| , ,  |                                 | 3201 Griffin Road, Suite 104 |  |  |
| . Enter new principal office address,<br>Principal office address <u>MUST BE A S</u>   |                                 | Fort Lau                     | derdale, FL 33312  |  |
| Enter new mailing address, if apple (Mailing address MAY BE A POST)  If amending the registered agent an new registered agent and/or the new | OFFICE BOX)                     | Fort Lauc                    | fin Road, Suite 104<br>derdale, FL 33312<br>oter the name of the |  |
| Name of New Registered Agent   | Jessica Aguilera                |                              |  |  |
| Name of New Registered Agent   | 3201 Griffin Roa                | d, Suite 10                  | 04   |  |
|  | (Florida stree                  | t address)                   |  |  |
| New Registered Office Address:   | Fort Lauderdale                 |                              | , Florida 33312  |  |
|  | (City)                          |                              | (Zip Code)   |  |
| ew Registered Agent's Signature, if c<br>hereby accept the appointment as regist   | hanging Registered Agent:       |                              | e obligations of the position.                                   |  |

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             | PT Joh                | n Doe            |                     |
|-------------------------------|-----------------------|------------------|---------------------|
| X Remove                      | <u>V</u> <u>Mil</u>   | ce Jones         |                     |
| X Add                         | <u>SV</u> <u>Sall</u> | ly Smith         |                     |
| Type of Action<br>(Check One) | <u>Title</u>          | Name             | <u>Addres</u> s     |
| 1) Change                     | Presid                | Iris van Rees    | 3761 N. Park Road   |
| Add                           |                       |                  | Hollywood, FL 33021 |
| Remove                        |                       |                  |                     |
| 2) Change                     | Pres                  | Jessica Aguilera | 3712 Garden Lane    |
| Add                           |                       |                  | Miramar, FL 33023   |
| Remove                        |                       |                  |                     |
| 3) Change                     |                       |                  |                     |
| Add                           |                       |                  |                     |
| Remove                        |                       |                  |                     |
| 4) Change                     |                       |                  |                     |
| Add                           |                       |                  |                     |
| Remove                        |                       |                  |                     |
| 5) Change                     |                       |                  |                     |
| Add                           |                       |                  |                     |
| Remove                        |                       |                  |                     |
| 6) Change                     |                       |                  |                     |
| Add                           | ·····                 |                  |                     |
| Remove                        |                       |                  |                     |

| If amending or adding additional Artic (Attach additional sheets, if necessary). | (Be specific)  |
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| If an amandment areaids for an area  | leading of leaved shows  |
| provisions for implementing the amen   | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| (if not applicable, indicate N/A)  |  |
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|  | _, if other than the |
|--|----------------------|
| date this document was signed.   |                      |
| Effective date if applicable:  | _                    |
| (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 (0/25/14)  |                      |
| 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) | _                    |
| Josephine Jessica Oguilera_<br>(Typed or printed name of person signing)   | _                    |
| President  | _                    |
| (Title of person signing)  |                      |