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TALL/FISSZE TORIDA

JAN 2 7 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DEMOCRA BER: P1300008015	ACIA TV CORP			
	s of Amendment and fee are su				
	espondence concerning this ma	·			
Trouse retain an eon.		_			
	HUGO BRACHO				
	DEMOCRACIA T	Name of Contact Person	1		
	DEMOCRACIA I	Firm/ Company			
	5624 NW 109TH AVE				
		Address			
	DORAL, FLORID				
		City/ State and Zip Cod	С		
FA	STBRA@HOTMA				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
HUGO BRACHO		at (786	、488-9881		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

FILED SECRETARY OF STATE TALLAR TERES TO DRIDA

Articles of Amendment to . Articles of Incorporation of

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DEMOCRACIA TV CORP

DEMOCRACIA IV CORP	···-
(Name of Corporation as currently filed with the Florida Dept. of State)	
P13000080151	
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ing amendment(s) to
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 "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name musword "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 PEDRO CASTILLO	
3563 NW 82 AVE	
(Florida street address)	
New Registered Office Address: DORAL Florida 33122	
New Registered Agent's Signature, if changing Registered Agent:	_
hereby accept the appointment as registered agent. I pm amiliar with and accept the obligations of the position	1.
- Character - Commence	
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 <math>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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	HUGO BRACHO	3563 NW 82 AVE
Add			DORAL, FLORIDA 33122
Remove			
2) Change	P	PEDRO CASTILLO	3562 NW 82 AVE
✓ Add			DORAL FLORIDA, 33122
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) adoption: date this document was signed.	, if other than the
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	
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 01/10/2014	
Signature (By a director, president or officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiductary by that fiduciary)	_
HUGO BRACHO	
(Typed or printed name of person signing)	
REGISTERED AGENT / President	<u> </u>
(Title of person signing)	