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MAY 27 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: VISUAL CREATIVITY INC. P13000100280						
DOCUMENT NUMBER: 1300100280						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
REGISTERED AGENT: DENISE BARTON Name of Contact Person						
AMERICAN SAFETY COUNCIL, INC						
5125 ADANSON ST SUITE 500						
ORLANDO FL 328x						
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Contact Person at (305) 7466 35 741 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:						
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) 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

FILED

36Y 14 87 3:07 **Articles of Amendment Articles of Incorporation** (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: 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:

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

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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	\sqrt{D}	SEBASTIANO	200 SOUTH BISCAYNE
\bigwedge Add	1	RAFFA	BOULEVARD, SUITE 2490
Remove		•	MIAMI, FC US 33 139
2) Change	V/D R	ICCARDO GIUSEP	PPE 200 SOUTH BYSCAY M
_ X Add	+	RAFFA	BOULEVARD, SUITE 271
Remove			MIAMI, FLUS 33139
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
6) Change			
Add			
Remove			

Attach additional	dding additional Ar sheets, if necessary).	(Be specific)		1V//	<i>‡</i>
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provisions for it	t provides for an exc mplementing the am cable, indicate N/A)	change, reclassific tendment if not co	ation, or cance entained in the s	ilation of issued share amendment itself:	···· N//
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: DAVE ON WHICH DOWN FUT IS FICED	
(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 05/08/2014	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if it the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
GUSEPPE RAFFA	
(Typed or printed name of person signing)	
PVST	
(Title of person signing)	