P14000040901

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NEW MEDIA DOCUMENT NUMBER: P140000409	A & ENTERTAINN	MENT, INC.			
DOCUMENT NUMBER: 1 1400040301					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
CESAR JIMEN	· · · · · · · · · · · · · · · · · · ·				
Name of Contact Person NEW MEDIA & ENTERTAINMENT, INC.					
7950 NW 53RD ST SUITE 337					
MIAMI, FL,33166					
	City/ State and Zip Cod	e			
alexjimenez2006@	@gmail.com				
E-mail address: (to be used e annual report notification)					
For further information concerning this matter, please call:					
CESAR JIMENEZ OLIVA	CESAR JIMENEZ OLIVARES at (310) 703-4015				
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301			

Articles of Amendment Articles of Incorporation



NEW MEDIA & ENTERTAINMENT, INC.

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

P14000040901

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(Document Nur	mber of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following amendment
A. If amending name, enter the new name of NEWS MEDIA & ENTE		T, INC.	The new
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	the word "corporation," "Corp," "Inc," or "C	" "company," or "incorpo. o". A professional corpora	rated" or the abbreviation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent and/or i	registered office addre	ss in Florida, enter the nam	e of the
new registered agent and/or the new regi			
Name of New Registered Agent	4		
	(Florida stree	et address)	
New Registered Office Address: N/A	<u> </u>	, Florida_	
	(City)		(Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a		ith and accept the obligations	of the position.
		·	
Cianatin	ra of New Paristand As	vant if alamaina	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	N/A		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Rémove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

Α	. (Be specific)		
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If an amendment provides for an ex	change, reclassificati	ion, or cancellation of	issued shares,
	nendment if not conta	ained in the amendme	ent itself:
provisions for implementing the an			
provisions for implementing the an (if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)	-		
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			

The date of each amendment	t(s) adoption: 05/12/2014	, if other than the
date this document was signed	. 05/12/2014	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	-
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wes by the shareholders was/wes	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_05/1	2/2014	
Signature	By a director, president of other officer – if directors or officers have not been	
se	elected, by an incorporatory if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	CESAR JIMENEZ OLIVARES	
	(Typed or printed name of person signing)	
	PRESIDENT/OFFICER/DIRECTOR	
	(Title of person signing)	