## P15000005197

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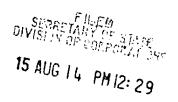
AUG 17 2015 C LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: L.T.T. Studios, Inc.					
DOCUMENT NUMBER: P1500000519	7				
The enclosed Articles of Amendment and					
Please return all correspondence concerning	g this matter to the following:				
Tomy Bolanos					
	Name of Contact Person				
<u></u>	Firm/ Company				
18215 SW 145 ave					
Address Miami, FL 33177					
	City/ State and Zip Code				
info@lttstudio.com					
E-mail address	: (to be used for future annual report notification)				
For further information concerning this ma	tter, please call:				
Tomy Bolanos	305 590-3109				
Name of Contact Person	at (305) 590-3109  Area Code & Daytime Telephone Number				
Enclosed is a check for the following amou	ant made payable to the Florida Department of State:				
■ \$35 Filing Fee □\$43.75 Filing Certificate of					
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				

## Articles of Amendment to Articles of Incorporation of



L.T.T. Studios, Inc.

(Name	of Corporation as current	ly filed with the Florida Dept. of State)
P15000005197		
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
LTT Studio, Inc.		The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
, ,		N/A
B. Enter new principal office address, (Principal office address MUST BE A S		···
(Comopar ogjace dadreds <u>aroot burit</u>	TRUET TIDDICESS )	
C. Enter new mailing address, if appl		N/A
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	·
		AND THE RESERVE OF THE PROPERTY OF THE PROPERT
D. If amending the registered agent ar		
new registered agent and/or the ne		<u>s:</u>
Name of New Registered Agent	N/A	
	(Florida st	reet address)
New Registered Office Address:	N/A	P121.
New Registerea Office Address:		, Florida (City) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent	i <del>:</del>
l hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligations of the position.
	Signature of New 1	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>ones</u>		
X Add	<u>sv</u>	Sally Sr	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) X Change	P	_	Jorge Coello		4550 NW 9th St APT 812
Add					Miami, FL 33126
Remove					
2) Change		<del></del>		<del></del>	
Add					
Remove					
3 ) Change	<del></del>	_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		<del></del>		<del></del>	
Add					
Remove					

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
,	
······································	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	
V/L	
-	
.,	

The date of each amendment(s)	adoption:	ينده دمه هم	if the bif other than the
date this document was signed.	,	อเชเรีย	The Expif other than the
Effective date <u>if applicable</u> :	(no more than 90 days a	fter amendment file date) 15 AL	<del>16   4   PH  2: 2</del> 9
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable state. Department of State's records.	tutory filing requirements, this d	late will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number sufficient for approval.	of votes cast for the amendment	(s)
	approved by the sharcholders through voti for each voting group entitled to vote sept		nent
"The number of votes ca	ast for the amendment(s) was/were sufficient	ent for approval	
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without	shareholder action and sharehold	der
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without share	eholder action and shareholder	
August, Dated	06 2015		
selec	a director, president or other officer – if detect by an incorporator – if in the hands cointed fiduciary by that fiduciary)	irectors or officers have not beer of a receiver, trustee, or other cou	n urt
	Jorge Coello		
	(Typed or printed name of	person signing)	
	President		
	(Title of person	signing)	