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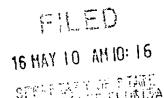
TO: Amendment Section

Division of Corporations NAME OF CORPORATION: \_\_\_\_\_ SELLITTO VIDEO SYSTEMS INC DOCUMENT NUMBER: P15000034413 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **RONALD SELLITTO** Name of Contact Person SELLITTO VIDEO SYSTEMS INC Firm/ Company 14161 SW 22 PLACE Address **DAVIE, FL 33325** City/ State and Zip Code TONYJS@BELLSOUTH.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 ) 989-8225

Area Code & Daytime Telephone Number **RONALD SELLITTO** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee **■**\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



SELLITTO VIDEO SYSTEMS INC

,	s currently filed with the Florida Dept. of State)
•	
P15000034413	
(Document )	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ration:
	The new
	corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the reviation "P.A."
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRES</u>	<u>(32</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	ffice address in Florida, enter the name of the
<ol> <li>If amending the registered agent and/or registered of new registered agent and/or the new registered office</li> </ol>	
new registered agent and/or the new registered office	
Name of New Registered Agent	
new registered agent and/or the new registered office  Name of New Registered Agent	e address:

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 Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	ANTHONY SELLITTO	16450 NW 16 ST
XV Add			PEMBROKE PINES, FL 33028
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)  THIS IS TO CERTIFY THAT RONALD SELLITTO OF 14161 SW 22 PLACE, DAVIE FL 33325 AND ANTHONY
SELLITTO OF 16450 NW 16 ST, PEMBROKE PINES, FL 33028 HOLD STOCK IN THIS COMPANY ON A 50/50
BASIS ( JTWRS ).
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
N/A
·

JANUARY 1, 2016	:Cathar thau't
The date of each amendment(s) adoption:date this document was signed.	, if other than t
Effective date if applicable:	
(no more than 90 days after amendment f	ile date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the am	following statement endment(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 action was not required.	on and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action an action was not required.	d shareholder
Dated 3 - 3 - 1 -	
Signature Report Signature (By a director, president or other officer – if directors or officer	
Signature (By a director, president or other officer – if directors or officer	rs have not been
selected, by an incorporator – if in the hands of a receiver, trus	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	t
(Typed or printed name of person signing)	
President	
(Title of person signing)	