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SECRETARY OF STATE ALLAHASSEE, FLORID

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COVER LETTER

Division of Corporations NAME OF CORPORATION: US MEDIA, INC DOCUMENT NUMBER: P15000036959 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOHN HAYS Name of Contact Person US MEDIA, INC Firm/ Company 1000 WATERSIDE CIR Address WESTON, FL 33327 City/ State and Zip Code johnmphays@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: $at \, (\frac{305}{\text{Area Code \& Daytime Telephone Number}})$ JOHN HAYS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

US MEDIA, INC	01			
	currently flied with the F	lorida Dept. of State)		
P15000036959				
(Documen	t Number of Corporation (i	f known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following a	mendment(s) to
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional corpo	porated" or the abbr	he new reviation stain the
B. Enter new principal office address. (Principal office address MUST BE A S.)	if applicable:	N/A		
C. Enter new mailing address, if applia (Mailing address MAY BE A POST of the control of the con	OFFICE BOX) d/or registered office address	N/A ress in Florida, enter the nati	ame of the	
Name of New Registered Agent	JOHN HAYS	105 010	_	
	1000 WATERS		_	
New Registered Office Address:	WESTON	eet address), Florid	33327	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe Sig		with and accept the obligation	(Zip Code) TALLAHASSEE, FL	15 NOV 23 AM

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	PT	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address .
1) Change	PD	SOLEDAD D HAYS	1457 BANYAN WAY
Add			WESTON, FL 33327
Remove		•	
2) Change	PD	JOHN HAYS	1000 WATERSIDE CIR
Add			WESTON, FL 33327
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change		·	
Add			
Pemove			

[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)	Α	
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
Enecuve date it applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were acaction was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 11/12/2	2015	
Signature		
(By a select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
	SOLEDAD D HAYS	
• ;	(Typed or printed name of person signing)	
. 3	PRESIDENT/DIRECTOR	
•	(Title of person signing)	