Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000238345 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

**±** (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)694-1639

\*\*Enter the email address for this business entity to be used for future

Email Address:	annual	report	mailings.	Enter	only	one	email	address	please.**
	Emaid	Address	•	,					··

## **\*COR AMND/RESTATE/CORRECT OR O/D RESIGN** AETERNUM FILMS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

OCT 06 2015 C MCNAIR

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment

	i utleten of the commentary	
	Articles of Incorporation of	
AETERNUM FILMS, INC.	•	
		77.4
	[Corporation as currently filed with the Florida Dept. of State)	3 m
P15000047103	<u> </u>	
	(Document Number of Corporation (if known)	
	4444 MI 14 de como 15 (1 mm 14 m 17 m 17 m 1 m 1 m 1 m 17 m 17	A. C.
rursuant to the provisions of section 607.4 its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the fo	Howing amendment(s) to
A. Hamending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and cont	ain the word "corporation," "company," or "incorporated" or	
"Corp.," "Inc.," or Co.," or the designe word "chartered," "professional associat	ation "Corp," "Inc," or "Co". A professional corporation name tion," or the abbreviation "P.A."	must contain the
B. Enter new principal office address.		W (7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Principal office address MUSI BE A ST	TREET ADDRESS )	
		<del></del>
	·	
C. Enter new mailing address, if appli (Mailing address MAY BR A POST)	Cable:	
(industry duaress MAT ON A FOX) T	/FP/CE BUX/	
		··
D. If amonding the registered agent an	d/or revistered office address in Florida, enter the name of the	
new registered agent and/or the new	registered office address:	
Name of New Registered Agent		
TOTAL OF THEM RESISTED AND IN		
•	- (Florida street address)	
New Registered Office Address:	, Florida	
Tree Action Committee Manager	(City)	(Zip Code)
New Registered Agent's Signature, if a	hanging Registered Agent:	
	ered agent. I am familiar with and accept the obligations of the po-	tition.
·		
		<u>_</u>
	Signature of New Registered Agent, if changing	<del></del>

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 Doc			
X Remove	¥	Mike Jones			
_X Add	SY	Sally Smith			
Type of Action (Check One)	Title	Natur	Address		
1) Change	VP	Orlando Civilia III	765 WEST 76TH STREET		
X Add			HIALEAH, FL 33014		
Remove					
2)Change					
Add					
Remove					
3) Change					
Add					
Remove					
4)Change	· 				
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

· ;

L. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)					
<i>-</i>					
				- <u> </u>	
				· · · · · · · · · · · · · · · · · · ·	
····		<del> </del>			
<u></u>					
			···		
<del></del> -		<del></del>			
. If ar	samendment provides for an exchan Visions for implementine the amend (if not applicable, indicate N/A)	ge, reclassification, or can ment if not contained in th	reliation of issued shares, e amendment itself:		
		·			
	<u> </u>				
				· · · · · · · · · · · · · · · · · · ·	
<del></del>					

The date of each amendment(s) adoption:	if other than the
Effective date if applicable:  (no more than 90 days after amendment file	date)
Note: 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.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the abarcholders. The number of votes east for the by the shareholders was/were sufficient for approval.	c amendment(s)
The smendment(s) was/were approved by the shareholders through voting groups. The for must be separately provided for each voting group entitled to vote separately on the amer	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(a) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	sharcholder
Dated 8 24 (15	•
Signature	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
(Typed of printed name of person signing)	<u> </u>
Title of person signing)	
CHES OF DETSON SIPRING!	