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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: REBEL MONA GROUD, INC.					
DOCUMENT NUMBER: P 150000 5332 9					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
ORLANDO J. ESP WOSA Name of Contact Person REBEL MCDIA GROUP, INC. Firm Company 7999 N. FEDERAL HWY Address BOCA RATON FL. 33487 City/ State and Ip Code ORLANDO O REBLING. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
ORLAND ESPINOSA at (56) 288.1780 EXT 10/ Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee U\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

Articles of Amendment

to

Articles of Incorporation

FILED

	of			PM 1:49
Kerel Mei	DIA GROV	D.IN	Deligible 31	
(Name of Cor	rporation as currently fi	led with the Florie	da Dept, of State	FLORIDA
P 15 000	<u>U 5332</u>	9	CAMA WAY	West .
	(Document Number of Co	prporation (if know	n)	is the
ursuant to the provisions of section 607.1006, s Articles of Incorporation:	Florida Statutes, this Flo	rida Profit Corpor	vation adopts the fo	ollowing amendment(
. If amending name, enter the new name o	f the corporation:			
ame must be distinguishable and contain t	. , , , , , , , , , , , , , , , , , , ,			The new
ord "chartered," "professional association," Enter new principal office address, if apprincipal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	olicable: ET ADDRESS) - -			
o. If amending the registered agent and/or new registered agent and/or the new regi		in Florida, enter	the name of the	
	(Florida street d	address)		
New Registered Office Address:			, Florida	
	(Cit	ty)		(Zip Code)
New Registered Agent's Signature, if changi hereby accept the appointment as registered to		and accept the ob	ligations of the po	osition.
	Signature of New Regi	stered Agent, if ch	anging	· · · · · ·

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.

	ive, and saity smith, 51 as an Add.	
Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	Address 111
1)ChangeAdd	VP Michael Flood	BOCA RATON, FL 334
Remove 2) Change		
Add		
Remove		
3) Change Add		
Remove		
4) Change		
Add		
5) Change		
Add		
6) Change		
Add		
Damoua		

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	,

f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(у погаррнсионе, таксие 1974)	

The date of each amendment(s) adoption:	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 requirements, this date will not be document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	•
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_ 6 26/15/	
Signature //nland	
(By a director, president or other officer – if directors or officers have not been selected by an incorporator – if in the hards of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	