P15000058798

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SECRETARY OF STATE
DIVISION OF CORFORATIONS

AUG 2 4 2016 C LEWIS

COVER LETTER

Division of Corporations NAME OF CORPORATION: HOME MEDIA TECH FL DOCUMENT NUMBER: P15000058798 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PEDRO F SEMAAN Name of Contact Person HOME MEDIA TECH FL Firm/ Company 14725 SW 153rd PL Address MIAMI, FL 33196 City/ State and Zip Code ADMIN@HOMEMEDIATECHFL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 618-2219

Area Code & Daytime Telephone Number PEDRO F SEMAAN 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 Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

FILED SCORETARY OF STATE HVISION OF CORPORATION.

2016 AUG 15 PM 3: 47

HOME MEDIA TECH FL INC

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000058798	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:
HOME MEDIA TECH INC	The new
	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	X_i
,	
 If amending the registered agent and/or register new registered agent and/or the new registered of 	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regination hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
	. , ,
Signo	ature of New 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.

<u>X</u> Change	<u>PT</u>	John Do	<u>oe</u>			
X Remove	$\underline{\mathbf{v}}$	Mike Jones				
X Add	<u>sv</u>	Sally Sn	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name	Address		
1) Change						
Add						
Remove						
2) Change		_				
Add						
Remove						
3) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change						
Add		_				
Remove						
INCHIOVE						

-	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
	nange, reclassification, or cancellation of issued shares,
an amendment provides for an exch	
an amendment provides for an exchorovisions for implementing the amerous (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
orovisions for implementing the amer	ndment if not contained in the amendment itself:
orovisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
<u>provisions for implementing the amer</u>	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	if other than the
date this document was signed.	SECRETARY OF STATE BIVISION OF CORPORATIONS
05/02/2016	5171010H 01 C 011 111111111
Effective date if applicable: (no more than 90 days after amendate)	nent file date) 2016 AUG 15 PM 3: 47
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes ca by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appr	oval
by	,,,
by(voting group)	·
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action cation was not required.	on and shareholder
05/02/2016 Dated	
Signature (By a director, president or other officer – if directors or of selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	
PEDRO F SEMAAN	
(Typed or printed name of person signi	ng)
PRESIDENT	
(Title of person signing)	