## P16000027616

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FALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 4TBIPLEO Media & Marketing G	rou
DOCUMENT NUMBER: P1666027616	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
George H. Williams	
4Triple O Media + Marketing Group Firm/Company	
2390 S.W. 164th auc	
Mira mar 7/05ida 33027 City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
George H. Williams at 305 333-6079	
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  Certificate of Status  Certified Copy (Additional copy is enclosed)  □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section  Amendment Section	

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

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

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Articles of A	mendment 6/6
to	She Way
Articles of Inc	orporation 466
4Triale O Media & Marketine (	mendment corporation  ALECATION  Frough INC  TOUGH INC
(Name of Corporation as current)	y filed with the Florida Dept. of State)
01/ 666002111	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
P1600007/616	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "	
word "chartered," "professional association," or the abbreviation "	P.A." George H. Williams
B. Enter new principal office address, if applicable:	4Triple O Media & Marketing Group
(Principal office address MUST BE A STREET ADDRESS)	700 - 101 - 101 0 1 007
	1950 11.6. 53rd )t. Suite 331
	M: 7133111
	Miani, 71 33166
C. Enter new mailing address, if applicable:	705- 115-2 10101227
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	1950 11 W. 5 Std St. Juite 33/
	m 71 331//
	Miani, 71 33166
D. If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address	<u>:</u>
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	•
I hereby accept the appointment as registered agent. I am familiar v	
Signature of New R	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 <math>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 Do	<u>oe</u>	
X Remove	¥	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<del></del>			
Add				
Remove				
2) Change				
Add				
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3) Change				
Add		<del></del>		
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	or adding additional A onal sheets, if necessary	). (Be specifi	c)			
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an amendr	nent provides for an e	change, reclas	sification, or c	ancellation of is	sued shares,	
rovisions f	or implementing the applicable, indicate N/A)	mendment if no	ot contained in	the amendmen	t itself:	
(ij noi a <sub>l</sub>	pricable, maicale N/A)					
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The date of each amendment(s) adoption:date this document was signed.	6-8-2016	, if other than the
Effective date if applicable:	6-8-2016	
(r	no more than 90 days after amendmer	nt file date)
<b>Note:</b> If the date inserted in this block does not r document's effective date on the Department of Sta		equirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr		for the amendment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro		
"The number of votes cast for the amendm	nent(s) was/were sufficient for approve	al
by(voting		39
(voting	group)	_
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder ac	ction and shareholder
The amendment(s) was/were adopted by the incoaction was not required.	orporators without shareholder action	and shareholder
Dated 6-8-20	016	
Signature blong	William	
` •	nt or other officer – if directors or offi orator – if in the hands of a receiver, to	
appointed fiduciary by		indication, or other count
	George H. William ped or printed name of person signing	<u>S</u>
	Heorne H. William	CEO
	(Title of person signing)	