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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: BESTMOVIES IN	dC.		
DOCUMENT NUM	BER: P16000036099			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Dina Nerdinsky, Esq.			
		Name of Contact Persor	1	
	Nerdinsky Ław Group, P.A.			
		Firm/ Company		
	3800 S. Ocean Dr., Ste 242			
		Address		
	Hollywood FL 33019			
		City/ State and Zip Code	e	
	E-mail address: (to be u	sed for future annual report	notification)	
		·	,	
For further informatio	n concerning this matter, pleas	se call:		
Dina Nerdinsky		95.4 at (	237-6307	
<u> </u>	of Contact Person		) de & Daytime Telephone Number	
			·	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	irtiment of State:	
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		<u>Address</u>	
	endment Section	Amendment Section Division of Corporations		
	ision of Corporations . Box 6327		n of Corporations Building	
	lahassee, FL 32314		xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

BESTMOVIES INC		
(Name of Corporati	ion as currently filed with the Floric	da Dept. of State)
1216000036099		
(Docur	ment Number of Corporation (if knows	n)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corpord	ation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		Thenew
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered." "professional association," or the	o," "Inc." or "Co" A professional	incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI		<del></del>
		T-01
C. Enter new mailing address, if applicable:	ANT.	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
D. If amending the registered agent and/or registe	ered office address in Florida, enter	the name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent	<del></del>	
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	gistered Agent:	
I hereby accept the appointment as registered agent.		ligations of the position.
	nature of New Revistered Agent if cha	

## 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.

Example: X Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	VP	TEPLYAKO	V, STANISLAV	19707 TURNBERRY WAY
Add				APT HE
X Remove				AVENTURA, FL 33180
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<del>-</del>		
Add				
Remove				
6) Change		-		
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
7.	
	ange, reclassification, or cancellation of issued shares,
if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
- ,,	Shares/Stock as to the Company, Stanislav Teplyakov has assigned
and transferred 100% of his shares as to Co	ompany stock, to Artur Airapetov.
Per said Assignment and Transfer of Share:	s/Stock, the 100% shareholder of the Company is Artur Airapetov.
*****	

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:  (no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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
Signature Scolyalow
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Stanislav Teplyakov
(Typed or printed name of person signing)
MEMBER
(Title of person signing)