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COVER LETTER

TO: Amendment Section Division of Corporations

	·
NAME OF CORPORATION: SqVRQK DOCUMENT NUMBER: P16 0000542	1 . 1
The enclosed Articles of Amendment and fee are su	
Please return all correspondence concerning this ma	tter to the following:
	Name of Contact Person
<u> </u>	Film/Company Dressive Mash Inc.
	Address Nigm: PL 33/61 City/State and Zip Code
E-mail address: (to be us	ymen + so, of a gma, i, com yed for future annual report notification)
For further information concerning this matter, please	se call:
Keth Lane	at (9(0) 990 - 70/b Area Code & Daytime Telephone Number
Name of Contact Person Enclosed is a check for the following amount made	· · ·
Enclosed is a check for the following amount made	payable to the Florida Department of State.
\$35 Filing Fee \$\Bigcup \$\$\$\$\$\$\$\$\$\$\$Certificate of Status	Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address 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 A. A. A.	`.
Spaceky doen pressure much laco	.9
(Name of Corporation as currently filed with the Florida Dept. of State)	· ;;
011.000(1201)	,
P100000>7254	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g 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," "company." or "incorporated" or the ac "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
 	
C. Enter new mailing address, if applicable:	
(Muiling address MAY BE A POST OFFICE BOX)	
· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent Farrick Harson	
1	-
14830 N Sour ar.	-
(Florida street address)	
New Registered Office Address: Miam , Florida Florida	331bl
(City) (Zip C	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Λ	
$\bigcap A = \alpha /$	
Laund Monus M.	
Signature of New Registered Agent, if changing	-
ingituate of their registered agent, if enunging	

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	<u>PT</u> <u>Joh</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change	<u>vp</u> _	Earrick Pearson	14830 N Spur du
Add			Miami PC 33161
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

	ing additional Articles, e eets, if necessary). (Be	specific)		
				
				
				
				
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
f an amendment p	rovides for an exchange,	reclassification, or c	ancellation of issued	shares,
provisions for imp	lementing the amendmen	nt if not contained in	the amendment itsel	<u>f:</u>
(ц пот арриса	le, indicate N/A)			

The date of each amendment(s) adoption:date this document was signed.	7-7-16	, if other than the
Effective date <u>if applicable</u> :	7-7-16 (no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not document's effective date on the Department of S		quirements, this date will not be listed as the
Adoption of Amendment(s) (CHE	ECK ONE)	
The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap		or the amendment(s)
☐ The amendment(s) was/were approved by the smust be separately provided for each voting g		
"The number of votes cast for the amend		I
by(votin	าย group)	
☐ The amendment(s) was/were adopted by the boaction was not required.		ion and shareholder
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators without shareholder action a	and shareholder
	ent or other officer – if directors or offic porator – if in the hands of a receiver, tru	
	yped or printed name of person signing)	
	(Title of person signing)	