## P16000071118

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EXPEDITUS THE				
DOCUMENT NUMBER: P16000031118				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Nadiuska Ramicez  Name of Contact Person  General Accounting Solutions Inc  Film/Company				
···				
12905 SW 42 nd ST # 205 Address				
MIAMI, FI, 33175 City/ State and Zip Code				
mm @ generalaccounting solutions. com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (305) S54 5090  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  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle				

Tallahassee, FL 32301

## · Articles of Amendment to

	Articles of Inco	rporation	2016 SEP 30	AM III OC
	F 30 dif		2010 357 30	AU 11: 02
	EXIJEAHI	15, INC.		
(Name of C	Corporation as currently	filed with the Florida Dept	. of State)	
(	PILODDOD	1/1/18		
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corporation ad	lopts the following a	mendment(s) to
A. If amending name, enter the new name	e of the corporation:			
	NIA		T	he new
"Corp.," "Inc.," or Co.," or the designati word "chartered," "professional association	on "Corp," "Inc," or "C	o". A professional corpora	rated" or the abbi	reviation ntain the
B. Enter new principal office address, if applicable:		14973 SW 50	9 ST MIAMI	FI
(Principal office address MUST BE A STR			,	7
		33193		
				<u>.                                    </u>
C. Enter new mailing address, if applical	hla	,		
(Mailing address MAY BE A POST OF		$\mathcal{N}\mathcal{A}$		
D. If amending the registered agent and/o	or registered office addre	ss in Florida, enter the nam	ie of the	
new registered agent and/or the new r				
Name of New Registered Agent		NA		
Hame of New Heginerea rigeria				
-	(Florida stree	t address)	<u> </u>	
	(1 torseet bires	KI/A		
New Registered Office Address:			, Florida (Zip Cod	<u></u>
	(C	City)	(Zip Coi	<i>(C)</i>
New Registered Agent's Signature, if chair I hereby accept the appointment as registered.		th and accept the obligation:	s of the position.	
	a	1/A		
	<u> </u>	ristered Agent if changing	<del>.</del>	
	Nanathre of New Rec	nsteren Agent II enanging -		

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>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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			 
Add			
Remove			
2) Change			
Add			
Remove	_		 
3) Change			
Add			
Remove			
4) Change		····	 
Add			
Remove			
5) Change	_		
Add			
Remove			
Keniove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: . (Be specific)
1000	
	NA
	811 May 1014 9 9
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	N/A
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:		or the TARV or if other than the
date this document was signed.		A VISION OF CORPORATE .
Effective date if applicable:	9   1   1   6 o more than 90 days after amend	2016 SEP 30 AH 11: 05 ment file date)
Note: If the date inserted in this block does not m document's effective date on the Department of State		g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECH	K ONE)	
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approximation approximation of the shareholders was/were sufficient for approximation of the shareholders.		ast for the amendment(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grou		
"The number of votes cast for the amendme	ent(s) was/were sufficient for app	roval
by(voting g	group)	.,
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were adopted by the incoraction was not required.	rporators without shareholder act	ion and shareholder
Dated 9/16/16		
	t or other officer – if directors or	Con Land
	rator - if in the hands of a receive	
YEND	IS R MARQUETTI	
_ Preside	(Title of person signing)	
	(Title of person signing)	