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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: MIAMI MEDIA M	IARKETING INC		
	IBER: P16000078054			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	ANTONIO LUIS TORREAL	BA	·	-
		Name of Contact Perso	n .	
	MIAMI MEDIA MARKETII	NG INC	•	
		Firm/ Company		_
<i>"</i>		Address	,	- .
	8600 NW SOUTH RIVER D	RIVE STE 102		
		City/ State and Zip Cod	le .	_
MIA	MI, FLORIDA 33166			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	e call:		
ANTONIO L TORR	EALBA SANCHEZ	786	660-4440	
Name	of Contact Person	Area Co	de & Daytime Telephone Numb	er
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 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)	

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

MIAMI MEDIA MARKETING INC.

A. If amending name, enter the new name of the corporation:	(Name of Corporation as currently	filed with the Florida Dept. of State)
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 abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing 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 (Florida street address) New Registered Office Address: (City) (City) (Zip Code) 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.	(Document Number of C	Corporation (if known)
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing 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 (Florida street address) New Registered Office Address: (City) (Zip Code) 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.	Pursuant to the provisions of section 607.1006, Florida Statutes, this Faits Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address. if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing 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 (Florida street address) New Registered Office Address: (City) (Zip Code) 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.	A. If amending name, enter the new name of the corporation:	
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, , , , , , , , , , , , , , , , , , ,	New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
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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.

X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike J	ones ·	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D	_ · ·	REINVENT CAPITAL, LLC	950 BRICKELL BAY DRIVE
XAdd				STE 2811
Remove				MIAMI FL 33131
2) Change	P	•	ANTONIO L TORRALBA SANCHI	8600 NW SOUTH RIVER DRIVE
Add				STE 102
X Remove				MIAMI FL 33166
3)Change	D		LIBELULA ENTERPRISES, INC	8600 NW SOUTH RIVER DRIVE
X Add				STE 102
Remove				
4) Change				·
Add	·			
Remove	•	•		
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				,

(Attach additi	or adding additional sheets, if need	ional Articles, en cessary). (Be sp	ner change(s) he	<u>re</u> :			
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provisions for	ment provides for or implementing oplicable, indicate	r an exchange, rette amendment	eclassification, o if not contained	r cancellation of in the amendme	f issued shares, ent itself:		÷
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09/29/2016	
The date of each amendment(s) adoption:	, if other than t
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment fi	ile date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	irements, this date will not be listed as t
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The f must be separately provided for each voting group entitled to vote separately on the am	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	n and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	d shareholder
09/29/2016 Dated	
Signature 56	
(By a director presiden or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, trust	
appointed fiduciary by that fiduciary)	iee, or other court
ANTONIO LUIS TORRE ALBA SANCHEZ	
(Typed or printed name of person signing)	1
DIRECTOR	P