## P16000093086

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MEDIA PRODUC	CTION GROUP, INC	
DOCUMENT NUM	P16000093086		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	•
Please return all corre	spondence concerning this ma	tter to the following:	
	JUSTIN RAY		
• 1		Name of Contact Perso	n
	TRI WEALTH BUILDERS		
<i>:</i>		Firm/ Company	
	3510 KRAFT RD. STE 200	)	
		Address	
	NAPLES, FL 34105		
. *a		City/ State and Zip Cod	e
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JUSTIN RAY		239 at (	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

MEDIA	PRODU	ICTION	GROUP	INC

•		Amendment		
		ncorporation		
		of A. Co.		
MEDIA PRODUCTION GROUP, INC		Amendment to neorporation of Alice the Florida Dept. of State)		
	of Corporation as currer	ntly filed with the Florida Dept. of State)		
P1600093086 				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendm		
A. If amending name, enter the new n	ame of the corporation:			
	•	The nev		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."		
; R - Enter new principal office address	if applicable:	3510 KRAFT RD		
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )		STE 200		
T.		NAPLES, FL 34105		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		3510 KRAFT RD		
		STE 200		
		NAPLES, FL 34105		
		dress in Florida, enter the name of the		
new registered agent and/or the ne	w registered office addre	<u>:585:</u>		
Name of New Registered Agent				
	3510 KRAFT RD STE			
		street address)		
New Registered Office Address:	NAPLES	34105 Florida ( <i>City</i> ) ( <i>Zip Code</i> )		
		(Chy) (Zip Code)		

' 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 De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	JAMIE L MOORE	6624 MERRYPORT LANE
Add				NAPLES, FL 34104
X Remove				
2) Change	VP	<i>)</i>	CURIE CUDMORE	3510 KRAFT RD
X Add		_	•	 STE 200
Remove				NAPLES, FL 34105
3 ) Change		<del></del>		 
Add				
Remove				
4) Change				 
Add				
Remove				
5) Change		<del></del>		 
Add				
Remove				
6) Change				
Add		_		
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
<del>.</del>	
·	
<u> </u>	· <del>-</del>
·	
	<del></del>
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(у погаррисате, такие кум)	

The date of each amendment(s date this document was signed.	september 14, 2018 adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
SEPTE Dated	MBER 14, 2018	
Signature <u>/</u> /	Valle Wayne Maore	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	WALTER MOORE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	