P16000100864

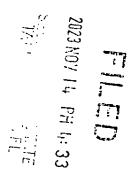
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
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COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations					
NAME OF CORPO	RATION: Barnes Interactive.	. Inc			
	BER: P16000100864				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Logan McEwen				
	Name of Contact Person				
	Marks Gray, P.A.				
	Firm/ Company				
	1200 Riverplace Boulevard, Suite 800				
	Address				
	Jacksonville, FL 32207				
		City/ State and Zip Code	:		
	matthewcorbin@me.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
Logan McEwen		at (_) 807-2120		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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)		
<u>Ma</u>	ailing Address	<u>Street</u>	Address		
	nendment Section disjon of Corporations	Amendment Section Division of Corporations			
יוכו	ciation or Corporations	DIVISIO	и от согрогацона		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

	to
Art	ticles of Incorporation
	of F
Barnes Interactive, Inc.	FILED
(Name of Corporation	as currently filed with the Florida Dept_of State)
P16000100864	τυτι ΜΟΥ 14 PH 4: 33
(Documen	t Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida St its Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
Corbin Rose Productions, Inc.	The new
·	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word

				
_	If amending the registered agent and/ new registered agent and/or the new t	or registered office address in Florida, enter	r the name of the	
•	Name of New Registered Agent			
	_	(Florida street address)		
	New Registered Office Address:	(City)	Florida	(Zin Codes

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

New Registered Agent's Signature, if changing Registered Agent:

"chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

C. Enter new mailing address, if applicable:

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 Do	<u>ee</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remova				

Attach additional sheets, if necessary).	(Be specific)
•	
	<u> </u>
It an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
nravisians for implementing the ama	ndment if not contained in the amendment itself:
provisions for implementing the ame	
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·
(if not applicable, indicate N/A)	

The date of each amendment(s) ac	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ade action was not required.	opted by the incorporators, or board of directors without sharehold	er action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amend officient for approval.	lment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(s	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	.^-	
,	(voting group)	
selecte	irector, president or other officer - if directors or officers have not d, by an incorporator - if in the hands of a receiver, trustee, or other officers by that fiduciary) Angela R. Barnes (Typed or printed name of person signing)	
	President	·
	(Title of person signing)	