P1760032967

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R. WHITE.
JUIL 0 4 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: RGB PRODUCTION	ONS, INC.			
	ER: P17000032967				
The enclosed Articles of	of Amendment and fee are st	ibmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	ALICIA C. JAVIER				
•		Name of Contact Person	n		
	RGB PRODUCTIONS, INC				
•		Firm/ Company			
	10629 NW 54th STREET				
•	Address				
	MIAMI FL 33178				
		City/ State and Zip Cod	e		
JAVII	ERALICIA6@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
ALICIA C. JAVIER		at (
Name o	f Contact Person	Area Code & Daytime Telephone Numb			
Enclosed is a check for	the following amount made	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



RGB PRODUCTIONS, INC.	2819 M/ Y 20 AN U 67
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P17000032967	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	<u>.</u>
N/A	The new
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." oword "chartered," "professional association," or the abbreviation	ntion," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	
	(00.
Name of New Registered Agent	
(rtorida	ı street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	
Cianata AM	w Registered Agent, if changing
Signature of the	w negratived Agent, if Changing

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:	re, and Sa	lly Smith, 5V as an Ada.	
X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1)Change	<u>V</u>	ROMMEL S. GUZMAN BRAVO	5161 NW 79TH AVE. Suite 4
Add			DORAL FL 33166
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Arti</u> (Attach <i>additional sheets, if necessary).</i>	cles, enter change (Be specific)	(s) here:			
N/A					
		911	<u> </u>		
		<u>.</u>	u.		
If an amendment provides for an excha	ange, reclassificat	ion, or cancellati	on of issued sh:	ires,	
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not cont	ained in the ame	ndment itself:		
			.		
'A		-1			
	·				

	05/15/2019	1
The date of each amendment(s) addate this document was signed.	loption:	if other than the
Effective date if applicable:	5/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required.	product without shareholder action and anarcholder	
05/15/2019 Dated		
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	ALICIA C. JAVIER	
	(Typed or printed name of person signing)	
1	PRESIDENT	
•	(Title of person signing)	