(Re	questor's Name)	<u></u>
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: MOTGETI INTERTALMENT DOCUMENT NUMBER: P17000035433
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MORA JUNIOR ETIENNE Name of Contact Person
MO JUETI INTERTAINMENT Firm/Company
480, EXECUTIVE CENTER DRIVE APT 5G
WEST PALM BEACH, FL 33401 = SM City/ State and Zip Code
MORAETIENNE Comail (Some Section Section)
For further information concerning this matter, please call:
MORA JUNIOR ETAENNE at (561) 503-0035
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

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 Articles of Incorporation (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NO SCIETI ENTERIAINMENTAINC 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." 480 EXECUTIVE CENTER DRIVE ALT 56 WESTRALMBEH, FL 33401 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: ORA JUNIOR ETIENME Name of New Registered Agent 480 EXECUTIVE CENTER DRAFT SG (Florida street address) WOTRALM DCH / FL 3346 1

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

New Registered Office Address:

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

(City)

Florida

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	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	NIA		<u>Addres</u> s	
1) Change			11/14			
Add						_
Remove			11/0	cltures		
2) Change						_
Add						
Remove						
3) Change			h//	A		
Add						
Remove			,			
4) Change		_	W/a	<u> </u>		
Add						
Remove		/	1/1			
5) Change			<u>, </u>	 		
Add					<u> </u>	
Remove						_
6) Change	-		n/o c	Marca-		_
Add						_
Remove						

nending or adding additional A ch additional sheets, if necessary	y). (Be specific)
	r / /
	\mathcal{N}/\mathcal{A}
visions for implementing the ar	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
(if not applicable, indicate N/A))

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: 5/24/17	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 05/24/2012	
Signature Eleven to out	_
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	=
CEO, FOUNDER, PRESIDENT	