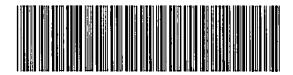


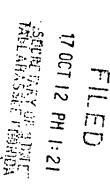
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OCT 13 2017

## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

1

NAME OF CORPORATION: FOX CREATINE STUDIO INC.
NAME OF CORPORATION: FOX CREATIVE STUDIO INC.  DOCUMENT NUMBER: \$17000039034
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria Ximena Otalora, Name of Contact Person
FOX CREATIVE STUDIO. Firm/Company
Firm/ Company
159 LAKEVIEW DR APT (0) Address
WESTON, FL 23326, City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MAI(A X OTA IOIA at ( 954), 609-2184  Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

## FILED 17 OCT 12 PM 1:21

FOX CLEATIVE STUDIO INC. FREE AFASSES FEDRIDA

(Name of Corporation as currently filed with the Florida Dept. of State) (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: 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) 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.

Signature of New Registered 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: 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>	<u>Addres</u> s
1) Change	P	Miriam Rodribuez	
Add			Survise Ft, 33326
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

<b>Famending or adding additional A</b> Mach <i>additional sheets, if necessar</i> y	). (Be specific	)			
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6		:Castian an aan	allatian aficcus	d abaras	
f an amendment provides for an e provisions for implementing the a	mendment if no	contained in the	amendment its	elf:	
(if not applicable, indicate N/A)	)				
		_	<del></del>	<del></del>	
				<del></del>	
				· · ·	
		_			

The date of each amendment(s) add	ption: 10/6/17	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file a	
	(no more than 90) days after amendment file a	late)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requiren artment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the icient for approval.	amendment(s)
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The followich voting group entitled to vote separately on the amena	owing statement lment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and sh	nareholder
Dated	10/6/17	
	1 24	
Signature		
	ctor, president or other officer – if directors or officers he by an incorporator – if in the hands of a receiver, trustee,	
	d fiduciary by that fiduciary)	or other court
	3/1 2/ 2/ 1	
_	(Typed or printed name of person signing)	<del></del>
	(Typed or printed name of person signing)	
	PRESIDENT	
<del>-</del>	(Title of person signing)	