P170000 84900

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COVER LETTER

TO: Amendment Section

Division of Corpo		r		
NAME OF CORPOR	ATION: PITATE SER: P1700008	er MEDIA 4900	INC-	
The enclosed Articles of	of Amendment and fee are sub	imitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Kevin Z	Doris		
	PIRAted	Name of Contact Person MSOIA TW		
		Firm/ Company		
	1929 HAI	Ven Bend Address FL 33612 City/ State and Zip Code		
		Address		
	TAMPA,	FL 3361	3	
		City/ State and Zip Code		
		Verizon-r		
,	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Kevin	DOVIS	at (813_	de & Daytime Telephone Number	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	τ the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filling Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ding Address		Address	
Am	endment Section	Amendment Section		
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee				
Tallahassee, F1, 32314		2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303		

Articles of Amendment Articles of Incorporation

FILED

PIRATEST MEDIA COSP

2022 JAN 14 PH 1: 06

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALL AHASSEE, FLORE P17000084900

(Document Number of Corporation (if known)

nt(s) to

A. If amending name, enter the new name	e of the corporation.	The new		
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Cor, "chartered," "professional association," or	p," "Inc." or "Co"	company," or "incorporated" or the abbreviation "Corp" A professional corporation name must contain the word		
B. Enter new principal office address, if a	applicable:	1929 HAVEN BEND		
(Principal office address MUST BE A STR	EET ADDRESS)	TAMPA, FL 33613		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1929 HAVEN BEND TAMPA, FL 33613		
		TAMPA, FL 33613		
D. If amending the registered agent and/ new registered agent and/or the new r	or registered office addresses Kevin D	<u>s:</u>		
Name of New Registered Agent _	<u> </u>			
Name of New Registered Agent	1929 HAVE	n Bend		
Name of New Registered Agent	1929 HAVE.	n Bend reet address)		
_	1929 HAVE.	n Bend		
New Registered Office Address: New Registered Agent's Signature, if cha	1929 HAVE. (Florida st TAMP)	n Bend reet address)		
New Registered Office Address: New Registered Agent's Signature, if cha	1929 HAVE. (Florida st TAMP)	n Bend reet address) (City) Thorida 33613 (Zip Code)		

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (e). F.S.

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: <u>X</u> Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	T Scott Umphlett	2054 RIVErside AVE
Add		APT 2406
Remove		JAX, FL. 32204
2) Change	S MAtt Prosen	2054 RIVErside AVE
Add		APT 2406
Remove 3) X Change	P MARK LUTENZO	JAX, FL 32204 1929 HAVEN BEND
Add		TAMPA, FL. 336B
Remove 4) Change	D,CEO Kevin Doris	1929 HAVEN Bend
_ X Add		TAMPA, FL. 33613
Remove 51 Change Add	T, C Gregg GiAcobbe	1929 HAVEN BEND TAMPA, FL. 33613
Remove 6) Change Add	S,TR VANCE Eskesen	1929 HAVEN BEND JAMPA, FL 33613
Remove		

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ttach <i>additiona</i>	adding additional Art d sheets, if necessary).	(Be specific)			
(if not applicable, indicate N/A)						
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The date of each amendment(s) ad late this document was signed.	option:		, if other than the
Effective date <u>if applicable</u> :			
	(no more than 90 da	nys after amandment file date)	
Note: If the date inserted in this bl document's effective date on the Dep		e statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators, or boar	rd of directors without shareholder action	and shareholder
The amendment(s) was/were adop by the shareholders was/were sul	oted by the shareholders. The nu- ficient for approval.	imber of votes cast for the amendment(s)	
		h voting groups. The following statement separately on the amendment(s):	
	or the amendment(s) was/were st	• •	
by	(voting group)	······································	
	(voting group)		
Dated	10/2012	_	
Signature	Dei		
selected		- if directors or officers have not been inds of a receiver, trustee, or other court	
	Kevin Dori	5	
_	(Typed or printed nam	ne of person signing)	

D, CEO, Registered Agent
(Title of person signing)