

	<u> </u>	
(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
(6	,, <u> </u>	,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Dc	cument Number	 1
•	,	
Cadified Carles	Cartificata	e of Statue
Certified Copies	_ Ceruncate	s or Status
Special Instructions to	Filing Officer:	





600316608596

08/07/18--01011--029 **35.00

FILED 1018 AUG -7 AM 10: 55 SECRETARY OF STATION OF STA

MC

R. WHITE AUG 0 9 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OUTRECH MEDI	A INC	
DOCUMENT NUMB	ER: P18000005457		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
F	ROBERT J THORNE		
_		Name of Contact Person	1
C	OUTRECH MEDIA INC		
-		Firm/ Company	
.	518 PINEWALK DR		
		Address	
	BRANDON, FL 33510		
-		City/ State and Zip Code	:
JOHN	@ORMMEDIAGROUP.Co	ОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ROBERT J THORNE		at (<u></u> 813	758-8062
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	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)
Mailing Address Amendment Section			Address Iment Section
	ion of Corporations		on of Corporations
P.O.	Box 6327	Clifton	Building
Talla	hassee FI 32314	2661 F	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

2018 AUG -7 AM 10: 55

OUTRECH MEDIA INC	ZUID AUG	
(Name of Corpo	ration as currently filed with the Flogen Con Assa	OF STATE
P18000005457	TALLAHAS	SEE. LE
(De	ocument Number of Corporation (if known)	·••;
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the	: following amendment(s)
A. If amending name, enter the new name of th	e corporation:	
ORM ENTERPRISES INC		The new
	word "corporation," "company," or "incorporated" Torp," "Inc," or "Co". A professional corporation na the abbreviation "P.A."	
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A		
	istered office address in Florida, enter the name of the	<u>e</u>
new registered agent and/or the new registe	red office address:	
Name of New Registered Agent		<u> </u>
	(Florida street address)	
New Registered Office Address:	, Florida	a
	(City)	(Zip Code)
	nt. 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:

(Aitach 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	PT	John Do	<u>ve</u>	
X Remove	\underline{V}	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				-
Remove				
2) Change	<u></u>			
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary).	(Be specific)				
		<u> </u>			
		-			
					
··				<u></u> .	
	<u> </u>				
	·				
		-			
. If an amendment provides for an exc	hange, reclassificatio	n, or cancellatic	n of issued sha	res.	
provisions for implementing the amo	ndment if not contai	ned in the amen	dment itself:		
(if not applicable, indicate N/A)					
		, -	_	<u> </u>	
			-		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	Il 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.	
07/25/2018	
Signature Color	
(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)	_
ROBERT J THORNE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	