P18000010341

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: __TALESPIN MEDIA CORP DOCUMENT NUMBER: P18000010341 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PAUL S. JAMES Name of Contact Person TALESPIN MEDIA CORP Firm/ Company 1296 BEACON CIRCLE Address WELLINGTON, FL 33414 City/ State and Zip Code PAUL.JAMES.NFA@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PAUL S. JAMES Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

TALESPIN MEDIA CORP

	n as currently filed w	ith the Florida Dept. of S	State)	
P18000010341				
(Docume	ent Number of Corpora	ation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida</i>	Profit Corporation adopts	the following amen	idment(s) to
A. If amending name, enter the new name of the cor	poration:			
HOT SHOT DIRECT TRANSPORT, INC.			The	M.C.
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.,' word "chartered," "professional association." or the a	"Inc," or "Co". A	npany," or "incorporated professional corporation	I" or the abbrevia	ation
B. Enter new principal office address, if applicable:		<u> </u>	11.11 122 2011 1 122	_1
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS)			:-1
			- C	ー
	-		<u>_</u>	
C. Enter new mailing address, if applicable:	-			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<i></i>			
	 -			
D. If amending the registered agent and/or registere	d office address in Fl	orida, enter the name of	the	
new registered agent and/or the new registered of				
Name of New Registered Agent				
	(Florida street addres	is)		
New Registered Office Address:		. Flor	ida	
	(City)		(Zip Code)	 .
New Registered Agent's Signature, if changing Regis	4			
I hereby accept the appointment as registered agent. I	tered Agent: am familiar with and i	accept the obligations of th	e position.	
		·		
e	ure of New Registered	I Amount of the contract		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	 ,	_	
Add			
Remove			
2) Change	_		2 2 7
Add			The same of the sa
Remove			
3) Change			
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tan 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 NA)	If amending or adding additional Articles, enter change(s) here Attach additional sheets, if necessary). (Be specific)	_
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)		
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	<u>provisions for implementing the amendment if not contained i</u>	in the amendment itself:
		

The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	oted by the shareholders. The number of votes cast for the amendment(s) ficient 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):	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	2
		= -11
☐ The amendment(s) was/were ado action was not required.	in the second se	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	てつ
01/11/2019		ည်
DatedSignature	LA RESIDUX/CEO	,
(By a di 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)	_
	PAUL S. JAMES	
-	(Typed or printed name of person signing)	
	PRESIDENT / CEO	
-	(Title of person signing)	·