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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 3S ENTERTAINS	MENT INC
DOCUMENT NUMBER: P18000074119	
The enclosed Articles of Amendment and fee are so	ubmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
EDGARDO SANCHEZ	
	Name of Contact Person
38 ENTERTAINMENT INC	2
	Firm/ Company
1106 WEST OAK SUITE C	-1
	Address
KISSIMMEE, FL 34741	
	City/ State and Zip Code
3SINFO@GMAIL.COM	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea EDGARDO SANCHEZ	
Name of Contact Person	at () 773-5622 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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 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

3S ENTERTAINMENT INC		Z019 SI 120 A	1: 7: 59
(Name of Corporatio	n as currently filed with th		
218000074119		•	
(Docume	ent Number of Corporation (if known)	- · -
Pursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	Statutes, this Florida Profit	Corporation adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the cor	peration:		
			The new
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 profe. phbreviation "P.A."	," or "incorporated" or the ssional corporation name m	calbreviation ist contain the
B. <u>Enter new principal office address, if applicable:</u> Principal office address MUST BE A STREET ADD			
<u></u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON	ź.		
(Mailing duaress MA) BE A POST OF FICE BOX	<u> </u>	·	
			
D. If amending the registered agent and/or registered		, enter the name of the	
new registered agent and/or the new registered of	omee address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		121.547.15	
New Registerea Office Address.	(City)	Florida 	Lip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:		
hereby accept the appointment as registered agent. I		t the obligations of the positio	m.

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: XChange	$\overline{\mathbf{b}.\mathbf{t}}$	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	GABRIEL GUADALUPE	954 NIBLICK DR
X Add			CASSELBERRY FL 32707
Remove			
2) Change			_
Add			
Remove			
3) Change			
Add			
Remove			-
4) Change			-
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

f amending or adding additional Art Attach <i>additional sheets, if necessary).</i>	. (Be specific)	
		 -
	<u> </u>	
an amendment provides for an evel	change, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(4, 11, 12, 13, 11, 11, 12, 13, 13, 13, 13, 13, 13, 13, 13, 13, 13		
		
	· · · · · · · · · · · · · · · · · · ·	
		-

The date of each amendment date this document was signed.		, if other than the
_	09/08/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(size sufficient for approval.)
	e approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholde	r
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
9/8/20 Dated	019	
Signature	I Kwas	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	·
	ILIA RIVAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	