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Amendham

MAY - 6 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

FILING CANCELLED DUE TO RETURNED CHECK

NAME OF CORPORA	TION: LEVEL UP PROD	OUCTIONS, INC	<u> </u>
DOCUMENT NUMBE	D10000075210		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
J,	ASON CHOY		
		Name of Contact Persor	1
L	EVEL UP PRODUCTIONS	S, INC	
_		Firm/ Company	
69	OI SW 104TH TER		
-		Address	
P	EMBROKE PINES FL 330	25	
_		City/ State and Zip Code	2
ICHOV	@NU-EVENTS.COM		
	-	sed for future annual report	notification)
	13-mail address, (to be di	sed for rattire annual report	
For further information of	oncerning this matter, pleas	se call:	
JASON CHOY		404 at (7698222
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Articles	s of Amendment	FILING CANCELLED	
	to	DUE TO RETURNED CHEC	
Articles	of Incorporation of	Elo A	
LEVEL UP PRODUCTIONS, INC			
(Name of Corporation as cur	rrently filed with the	e Florida Dept. of State)	
P18000075319		e Florida Dept. of State)	
(Document Num	ber of Corporation (i	fknown)	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florida Profit</i>	Corporation adopts the following amendment	
A. If amending name, enter the new name of the corporation	on:		
LEVEL UP PRODUCTIONS AND EVENTS, 🗯 🕻 🔘		The new	
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," word "chartered," "professional association," or the abbrevia	" or "Co". A profes	" or "incorporated" or the abbreviation	
B. Enter new principal office address, if applicable:	4000 HOLI	YWOOD BLVD SUITE 555	
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWO	HOLLYWOOD FL 33021	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4000 HOLI	LYWOOD BLVD SUITE 555	
	HOLLYWO	OOD FL 33021	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		, enter the name of the	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·		
(Flan	rida street address)		
	·		
New Registered Office Address:	(City)	, Florida	
	(477.97)	(iii,	
New Registered Agent's Signature, if changing Registered A lereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept	the obligations of the position.	
Signature of .	New Registered Ager	nt, 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)

Remove

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 Do	<u>e</u>	FILING CANCE	CLLED
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	DUE TO RETUR	RNED CHECK
X Add	<u>sv</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
7 1					
5) Change					
Add					
Remove					
6) Change					
Add					

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	FILING CANCELLED DUE TO RETURNED CHEC
<u> </u>	
<u> </u>	
	11. Consections of above
If an amendment provides for an exchange, reclassification, or can provisions for implementing the amendment if not contained in the	cettation of issued snares, e amendment itself:
(if not applicable, indicate N/A)	

	04/24/2019	
	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after a	amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory partment of State's records.	y filing requirements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of verifficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting g each voting group entitled to vote separate	roups. The following statement ely on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for	or approval
by		
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without share	eholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without sharehold	der action and shareholder
04/24/2019	9	FILING CANCELLED
DatedSignature		DUE TO RETURNED CHECK
Signature	director, president or other officer if direct	ors or officers have not been
selecte	ed, by an incorporator – if in the hands of a rated fiduciary by that fiduciary)	
	JASON CHOY	
	(Typed or printed name of person	on signing)
	PRESIDENT	
	(Title of person sign	ning)