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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
| Special Instructions to | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Southeast Creative Group Inc | | | | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBER: P19000016675 | | | | | |
| The enclosed Articles of Amendment and fee are s | submitted for filing. | | | | |
| Please return all correspondence concerning this m | atter to the following: | | | | |
| James Farrar | | | | | |
| | Name of Contact Person | | | | |
| Southeast Creative Group In | Southeast Creative Group Inc | | | | |
| | Firm/ Company | | | | |
| 3375 NW 55th St, Suite B | | | | | |
| | Address | | | | |
| Fort Lauderdale, FL 33309 | | | | | |
| | City/ State and Zip Code | | | | |
| info@southeastereativegroup.com | | | | | |
| | used for future annual report notification) | | | | |
| | , | | | | |
| For further information concerning this matter, plea | ase call: | | | | |
| James Farrar | 754 332-2263 | | | | |
| Name of Contact Person | at () Area Code & Daytime Telephone Number | | | | |
| Nume of Condict Person | Area code de Daytime Petephone Painbet | | | | |
| Enclosed is a check for the following amount made | e payable to the Florida Department of State: | | | | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee 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

| Southeast Creative Group Inc | |
|---|--|
| (Name of Corporation as currently filed wi | ith the Florida Dept. of State) |
| P19000016675 | |
| (Document Number of Corporat | tion (if known) |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida P</i> its Articles of Incorporation: | Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation: | |
| NIA | The new |
| name must be distinguishable and contain the word "corporation," "com "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p word "chartered," "professional association," or the abbreviation "P.A." | ipany," or "incorporated" or the abbreviation |
| B. Enter new principal office address, if applicable: | 201 |
| (Principal office address MUST BE A STREET ADDRESS) | 7 70 |
| | |
| | <u> </u> |
| C. Enter new mailing address, if applicable: | P - 1 |
| (Mailing address MAY BE A POST OFFICE BOX) | <u> </u> |
| | - 30 |
| | |
| | |
| D. If amending the registered agent and/or registered office address in Flonew registered agent and/or the new registered office address: | orida, enter the name of the |
| Name of New Registered Agent | |
| | \triangleright |
| (Florida street address | N) |
| New Registered Office Address: | , Florida |
| (City) | (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and a | accent the obligations of the position |
| zwy zazspe nie uppyrminen un regenereu ugent. T um juminur min unu u | esselve are configuration of the foundation. |
| | |
| | |
| 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: X Change | PT | John Do | <u>oe</u> | |
|----------------------------|-----------------|-------------|------------------------|-------------------------|
| X Remove | \underline{V} | Mike Jo | <u>nes</u> | |
| X Add | <u>sv</u> | Sally Sr | <u>nith</u> | |
| Type of Action (Check One) | Title | | Name | <u>Addres</u> s |
| 1) Change | P | _ | Nicholas J Santoriello | 5361 W HILLSBORO BLVD |
| Add | | | | Unit 301 |
| X Remove | | | | Coconut Creek, FL 33073 |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| f an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
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| | 11/04/2019 | |
|--|---|--------------------------------|
| The date of each amendment(s) | adoption: | , if other than th |
| date this document was signed. | | |
| 11/ Effective date if applicable: | 04/2019 | |
| Effective date in applicable. | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the E | block does not meet the applicable statutory filing requirements, this repartment of State's records. | date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were ac by the shareholders was/were s | lopted by the shareholders. The number of votes cast for the amendme ufficient for approval. | nt(s) |
| | proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s): | rment . |
| "The number of votes cas | t for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| action was not required. | lopted by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder | |
| · | | |
| 11/04/201 Dated | 9 | |
| Signature | | - , |
| select | director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary) | |
| | James T Farrar | |
| | (Typed or printed name of person signing) | |
| | CEO | |
| | (Title of person signing) | |