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(Re	questor's Name)	-
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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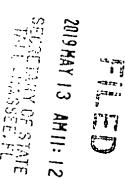


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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: VMI PROD	DUCTIONS INC	
	036663	
The enclosed Articles of Amendment and fee are sul	abmitted for filing.	
Please return all correspondence concerning this mat	itter to the following:	
RICH	HARD FRANCE Name of Contact Person	
VA	MI PRODUCTIONS, INC	
	Firm/ Company	
353 DEARSON ST		
	Address	
RASADE	ENA CA 91/04 City/ State and Zip Code	
	City/ State and Zip Code	
E-mail address: (to be use	Tance @ i cloud. Com / sed for future annual report notification)	
For further information concerning this matter, please	se call:	
RICHARD FRANCE	at (3/0) 686 - 86 /O  Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	
\$35 Filing Fee \$\$\sumsymbol{\text{\$\sin\text{\$\sin	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section Amendment Section		
Division of Corporations Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	
LAUAUANSEE EL 1/114		

Tallahassee, FL 32301

## Articles of Amendment

## Articles of Incorporation of

VMI PRODU	CTIONS	INC.	<u>ين.</u>	201	
(Name of Corporation as cur	rently filed with the	e Florida Dept. of Sta	te) 22	MA 6	ग=स्त्रम्
P190000	36663		25	=	
(Document Num	ber of Corporation (i	f known)		ယ	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this <i>Florida Profit</i> (	Corporation adopts the	following	amen	dment(s) t
A. If amending name, enter the new name of the corporatio	<u>n:</u>		लि	~	
VMI ENTERTAINA	NENT TN	IC.		The	new
NMI ENTERTAINA name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbrevial	or "Co". A profes	" or "incorporated" sional corporation na	or the ab me must c	brevia ontain	tion the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	·	90 E COI 9TH FLOOP			<u>3</u> LVD -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PASADENA, 790 E Co			
		9TH FLO PASADENI			_
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	dress:		_		
Name of New Registered Agent FR	ANCE, R	TCHARD HLEY DR			
(Flori	da street address)		<u> </u>		
New Registered Office Address:MIR	AMAR (City)	, Florida	33 (Zip C	Ode)	-5
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am family	iliar with and accept	the obligations of the p	oosition.		
Signature of N	ew Registered Ageni	t, 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
	_ <u>sv</u>	Sally Smith	
			A 2.1
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<del> </del>
Remove			
O. Ch.			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<del></del>	· · · · · <del> · -</del>
<del></del>	
son amendment provides for an exch provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	<del></del>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : 5/8/19	
Effective date if applicable: 5/0/1/ (no more than 90 days after amendment)	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	uirements, this date will 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 by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"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 was not required.	on and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action ar action was not required.	nd shareholder
Dated5/8/19 Signature	
Signature	
(By a director, president or other officer - if directors or office	
selected, by an incorporator – if in the hands of a receiver, trus appointed fiduciary by that fiduciary)	stee, or other court
RICHARD FRANCE (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
ChiEF Executive (Title of person signing)	OFFICER
(Title of person signing)	_

. . .