# P190000 Can 714

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### FILING CANCELLED DUE TO RETURNED CHECK

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Amend/Mance

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#### **COVER LETTER**

## FILING CANCELLED DUE TO RETURNED CHECK

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: BACKYARD EVI	ENTS, INC				
DOCUMENT NUMI		<del></del>				
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	JASON CHOY					
		Name of Contact Perso	on			
	BACKYARD EVENTS, INC					
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·			
	100 ASHLEY DR					
		Address	_			
	TAMPA, FL 33602					
		City/ State and Zip Coo	de			
JCH(	DY32@YAHOO.COM					
	•	sed for future annual repor	t notification)			
For further informatio	n concerning this matter, pleas	se call:				
JASON CHOY		at (	7698222			
Name	of Contact Person	Area Co	ode & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Dep	partment 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)			
Am Div	iling Address endment Section ision of Corporations . Box 6327	Street Address Amendment Section Division of Corporations Clifton Building				
	ahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

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#### Articles of Amendment to Articles of Incorporation



BACKYARD EVENTS, INC (Name of Corporation as currently filed with the Florida Dept. of State) P19000066714 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: MEDIA ONE EVENTS, INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 4000 HOLLYWOOD BLVD STE 555 B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) HOLLYWOOD, FL 33021 C. Enter new mailing address, if applicable: 4000 HOLLYWOOD BLVD STE 555 (Mailing address MAY BE A POST OFFICE BOX) HOLLYWOOD, FL 33021 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (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 accept the obligations of the position.

Signature of New Registered Agent, if changing

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	l sheets, if necessary).	(Be specific)			
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provisions for i	it provides for an exchimplementing the ameicable, indicate N/A)	ange, reclassificat ndment if not cont	ion, or cancellatio ained in the amen	n of issued shares, dment itself:	
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	<del>_</del>			·	

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 Do	<u>c</u>	FILING CANCELLED DUE TO RETURNED CHECK	
X Remove	<u>V</u>	Mike Joi	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	nith		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3 ) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
_	-	_		~~~	
Add					
Remove					
6) Change		_			
Add					
Remove					

	t(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	11/04/2019	
	(no more than 90 days after amendment file date)	<del></del>
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	•
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	บ
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we	ere adopted by the board of directors without shareholder action and shareholder	
action was not required.		
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
11/04 Dated	1/2019	
Signature	Q Oly	
(I s	By a director, president or other officer – if directors of officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	<del></del>
	JASON CHOY	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	

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