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PICK-UP	☐ WAIT	MAIL
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C. GOLDEN OCT - 9 2020

COVER LETTER

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TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION:INTERTWINE EN	ITERTAINMENT INC	
DOCUMENT NUM	BER: P20000062073		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	TUSHA L BROWN		
		Name of Contact Person	n
	INTERTWINE ENTERTAIN	RMENT INC	
		Firm/ Company	
	P O BOX 971492		
		Address	
	MIAMI, FL 33197		
		City/ State and Zip Cod	e
	TUSHABROWN@GMAIL.	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
TUSHA BROWN		at (398-0673
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

INTERTWINE ENTERTAINMENT INC

(Name of Corporation as	currently filed with the	Florida Dept. of State)	``````````
P20000062073			
(Document	Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this <i>Florida Profit C</i>	orporation adopts the following	g amendment(s
A. If amending name, enter the new name of the corpo	ation:		
		· · · · · · · · · · · · · · · · · · ·	The new
name must be distinguishable and contain the word "corpor" Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	"Co". A professional c	corporated" or the abbreviatio orporation name must contain	n "Corp.," the word
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u>'S</u>)		
	 	.	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
		<u> </u>	
D. If amending the registered agent and/or registered o	ffice address in Florida.	enter the name of the	
new registered agent and/or the new registered offic			
Name of New Registered Agent			
	- - · ·		
	Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip C	ode)
•			
New Registered Agent's Signature, if changing Register	ad Amanti		
I hereby accept the appointment as registered agent. I am		he obligations of the position.	
Signature	of New Registered Agent,	if changing	
	g is an agent	, , ,	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	\underline{V}	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	CEO	TUSHA BROWN	P O BOX 971492
X Add			MIAMI, FL 33197
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
	•		-,
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
ADDED CEO	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y nor applicable, marcae (viii)	
,	

1.1

The date of each amendment(s) adopt	AUGUST 19, 2020	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this dament of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(ent for approval.	s)
	ed by the shareholders through voting groups. The following statement by voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
TUSHA BROWN	."	
	(voting group)	
8/19/20		
Dated		
a Vista	2 Som	
Signature (By a direct	or, president or other officer – if directors or officers have not been	
selected, by	an incorporator - if in the hands of a receiver, trustee, or other cour	7
appointed f	duciary by that fiduciary)	
TUS	SHA BROWN	
	(Typed or printed name of person signing)	
CEC		
	(Title of person signing)	