P20 0000 85307

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COVER LETTER

TO: Amendment Section .

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations **DEVSING MEDIA CORP** NAME OF CORPORATION: P20000085307 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAMON ORTEGA Name of Contact Person RAMON ORTEGA CPA, PA Firm/ Company 1555 BONAVENTURE BOULEVARD SUITE 1028 Address WESTON, FL 33326 City/ State and Zip Code RORTEGA@RAMONORTEGACPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 954) 465-9315
Area Code & Daytime Telephone Number RAMON ORTEGA Name of Contact Person iclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment Articles of Incorporation

DEVSING MEDIA CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P20000085307

(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

	DEVSIGN MEDIA CORP	The no
name must be distinguishable and contain the we "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corporati	ited" or the abbreviation "Corp.
B. Enter new principal office address, if app		
(Principal office address <u>MUST BE A STREE</u>	<u> </u>	,07 ====================================
		JAL
C. Enter new mailing address, if applicables (Mailing address MAY BE A POST OFFICE)		- 0
). If amending the registered agent and/or remew registered agent and/or the new regis		36
new registered agent and/or the new regis		36
new registered agent and/or the new regis	stered office address:	<u> </u>
Name of New Registered Agent	stered office address:	36
new registered agent and/or the new regis	stered office address:	e name of the
new registered agent and/or the new registered Agent Name of New Registered Agent New Registered Office Address:	(Florida street address)	e name of the
new registered agent and/or the new registered Agent Name of New Registered Agent New Registered Office Address: Registered Agent's Signature, if changing	(Florida street address)	e name of the Florida(Zip Code)
new registered agent and/or the new registered Agent Name of New Registered Agent New Registered Office Address: Registered Agent's Signature, if changing	(Florida street address) (City)	e name of the Florida(Zip Code)

mendment(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 Do	<u>2</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sn	<u>ith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
Change				
Add		-		
Remove				
Change				
Add		_		
_ Remove				
_ _Change				
Add				
Remove				

mending or adding additional Art ach additional sheets, if necessary).	(Be specific)			
				<u>'</u>
				-
				
				
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			•	
n amendment provides for an exc	hange reclassification	n or cancellation	of issued chares	
n amendment provides for an exc ovisions for implementing the ame	endment if not contai	ned in the amend	ment itself:	
(if not applicable, indicate N/A)				
			·····	
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A Company of the Comp

The date of each amendment(s) adoption: Late this document was signed.	, if other than the
· ·	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendr by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following standard to separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
GEORGE CHILD	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)