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To:

Division of Corporations

Fax Number : (850)617-6380

from:

Account Name : TAX ZONE INC. Account Number : I20190000044 Phone : (407)888-3131

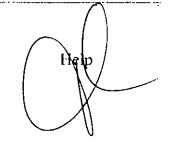
Fax Number : (888)453-0509

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN BLACKSTAGE STUDIOS INC

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COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPO	RATION: BLACKSTAGE S	TUDIOS INC	·			
DOCUMENT NUM	BER: P24000031508	· · · · · · · · · · · · · · · · · · ·				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	ED KOTLER					
		Name of Contact Person	,	 ,	21	
	TAX ZONE INC			돌	2024 HAY 22	aran a
		Firm/ Company			A	A A
	8865 COMMODITY CIR ST	E 4			22	
		Address		(i))	77
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		City/ State and Zip Code			2	
	ACCOUNTANT@TAXZON	EFL.COM			10	
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas	sc call: at (. 888-3131			
Name	of Contact Person	at (at Coo	de & Daytime Telephone Num	ber		
	or the following amount made					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certificate Of Status Certified Copy (Additional Copy is enclosed)			
Am Div P.O	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ussee, FL 32303			

To:

Articles of Amendment to Articles of Incorporation of

BLACKSTAGE STUDIOS INC				
(Name of Corporation as curre	ntly filed with the Florid	la Dept. of State)		
P24000031508		•		
(Document Numbe	r of Corporation (if know	n)		
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	nis Florida Profit Corpord	ution adopts the following	g amendr	ment(s) to
A. If amending name, enter the new name of the corporation;				
BACKSTAGE STUDIOS INC			The n	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.2"	A professional corpora	rated" or the abbreviation name must contain	n "Com.	. 0
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>	50.	2021	
		- - 1 2	_ _	etittin }
C. Enter new mailing address, if applicable:		ÀS.	2	∯ (==\7=1
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	**		D K	- \$ 0 B
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	a stray and other states we street to the stray of the state of		2	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.		the pame of the		
Name of New Registered Agent			•	
(Florida	street address)		•	
New Registered Office Address:		, Florida		_
	(Clry)	(Zip (Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nr with and accept the obl		_	
Signature of New	Registered Agent, if chai	nging	-	
Check if applicable				

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

From: Tax Zone

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)

Example:

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; CE() = 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.

X Change	PT	John Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
I) Change			*************		
Add					
Remove				2024 HA	_
2) Change	****	·		HAY	
Add				Y 22	
Remove 3) Change				70. A	
Add				75 X	
Remove					_
4) Change			W. LAS M. LISTANIAN	<u> </u>	
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Remove			******		. -
5) Change		erikol			•
Add					
Remove					_
6) Change	·				
Add			···		-
Remove					

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The date of each amendment(s) adoption: date this document was signed.	i if ot	her than the
Effective date if applicable:		
(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, this dedocument's effective date on the Department of State's records.	ite 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.	on and shareho	lder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)	
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be 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	ALLARASSEE FL	
(Title of person signing) (Title of person signing)		
(Time of person signing)		