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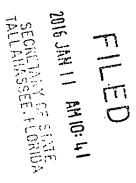
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Amend Mane

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Motchill, Inc.		
DOCUMENT NUM?		 —	
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Thomas L. Rossi		
•		Name of Contact Person	n
-	110.11	Firm/ Company	
	1104 Lakewood RD	Address	
:	Jacksonville, FL 32207	City/ State and Zip Cod	Α
suppoi	t@themolehill.com	t hyr state and zap cou	
For further information	E-mail address: (to be use concerning this matter, pleases)	sed for future annual report se call:	notification)
	A 1 34 3		521-1440
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314 through the first borg	Amenc Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

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Articles of Amendment to "%" Articles of Incorporation of

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State)	4//1	911/1 88/5/201	7.	-4/
			(\mathcal{M}_{i})	

Molehill, Inc.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P96000002044	The state of the s
- (Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Higher Pixels, Inc.	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5133 San Jose Blvd.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Jacksonville, FL 32217
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1104 Lakewood RD
	Jacksonville, Fl. 32207
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent	
• • • • • • • • • • • • • • • • • • •	
(Florida s	treet address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	ıt:
I hereby accept the appointment as registered agent. I am familian	
·	

Signature of New Registered Agent, 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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jon <u>es</u>	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Marshall Brown	5133 San Jose Blvd.
X Add			Jacksonville, FL 32217
Remove			
2) X Change	D	Thomas L. Rossi	5133 San Jose Blvd.
Add			Jacksonville, FL 32217
Remove			
3) X Change	<u> </u>	Kevin M. Finn	5133 San Jose Blvd.
Add		•	Jacksonville, FL 32217
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
The name Higher Pixels was previously registered by the same people as an LLC in the State of Florida. We have dissolved that LLC	
by the same people as an LLC in the state	
of Florida. We have dissolved that LLC	
and would like to use the Higher Pixels	
name without waiting the 120 days.	
•	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(g not applicable, material MA)	
· · · · · · · · · · · · · · · · · · ·	
<u> </u>	

01/01/2016	
The date of each amendment(s) adoption:date this document was signed.	if other 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 date wil document's effective date on the Department of State's records.	I 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 the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
01/05/2016	
Signature / / / / / / / / / / / / / / / / / / /	
(By a director, president of other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Thomas L. Rossi	
(Typed or printed name of person signing)	
Director / Partner	
/Title of person cianing)	