P96000080750

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COVER LETTER

Division of Corporations NAME OF CORPORATION: Catalog Productions, Inc. DOCUMENT NUMBER: P96000080750 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alberto D. Mollinea Name of Contact Person Catalog Productions, Inc. Firm/ Company 12100 NW 15 St. Address Pembroke Pines, FL 33026 City/ State and Zip Code albert@mollinea.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alberto Mollinea Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

Certificate of Status

Mailing Address

☐ \$35 Filing Fee

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the F	lorida Dept. of State)	5"
P96000080750			
(Document Numb	er of Corporation (i	f known)	
ursuant to the provisions of section 607.1006, F	lorida Statutes, this	Florida Profit Corporation	adopts the following
Articles of Incorporation:			,
. If amending name, enter the new name of t	he corporation:		
Mollinea Creative Group, Ir			
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "ord "chartered," "professional association," or	word "corporation Corp," "Inc," or "	Co". A professional corpo	
B. Enter new principal office address, if applications		12100 NW 15	5 St.
Principal office address <u>MUST BE A STREET</u>		Pembroke Pine	s, Fl 33026
Enter new mailing address, if applicable;		40400 ANA/ 45	- 04
	E BOX)	12100 NW 15	ં રા.
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u>)	Pembroke Pine	
	gistered office addı	Pembroke Pine	es, Fl 33026
(Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or registered agent and/or the new registered agent.)	gistered office addı	Pembroke Pine	es, Fl 33026
(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or registered agent and/or the new registered	gistered office address	Pembroke Pine	es, Fl 33026 ame of the

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 <math>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>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				- this disc.
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add	*************			· · · · · · · · · · · · · · · · · · ·
Remove				
Kemove				
6) Change		_		
Add				
Remove				· · · · · · · · · · · · · · · · · · ·

· 11/A	ticles, enter change(s) here: (Be specific)
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	· · · · · · · · · · · · · · · · · · ·

(if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
<u>provisions for implementing the amo</u> (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
<u>provisions for implementing the amo</u> (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s)	Adoption: August 1, 2012
Effective date if applicable:	ugust 15, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	at for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated Augi	ust 15, 2012
Signature	Mr Heli
select	tirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	Alberto D. Mollinea
	(Typed or printed name of person signing)
•	President
	(Title of person signing)