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SECNETARY OF STATE
ALLAHASSEE, FLORIDA

SEP 11 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Video Oulte	et I, Inc		
DOCUMENT NUMBER: P9700008203			
The enclosed Articles of Amendment and fee are sub			
Please return all correspondence concerning this matt	ter to the following:		
Cynthia Bauer			
- Syllina Badol	Name CC 444 B		
Video Outlet I, Inc	Name of Contact Person	1	
	Firm/ Company		
5820 Pulaski Hwy	,		
	Address		
Baltimore, MD 21205			
	City/ State and Zip Cod	e	
cb1010@verizon.net			
<u> </u>	ed for future annual report	notification)	
For further information concerning this matter, please	call:		
Cynthia Bauer	_{at (} 410	, 488-9166	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made p	ayable to the Florida Depa	ertment of State:	
□ \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

Articles of Amendment to

Articles of Incorporation of

FILED

Video Outlet I, Inc.

18 SEP -3 PM 2: 38

, SECRETARY OF STATE. TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State)

ndment(s) to

P97000008203			1 10022,11	-UNIDA -
(Docume	nt Number of Corporation (i	f known)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corpo	oration adopts the following	g amendme
A. If amending name, enter the new n	ame of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professiona		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		5249 Powerline Rd.		
		Ft. Lauderdale, FL 33309		
				•
C Enter new mailing address if ann	icahlar			,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5820 Pulaski Hwy.		-
		Baltimore,	MD 21205	_
D. If amending the registered agent an new registered agent and/or the ne			r the name of the	
Name of New Registered Agent	George Santoni	•		
<u>Name of New Registerea Agent</u>	8884 Sydney Ha	arbor Circle		
	(Florida stre			
New Registered Office Address:	Deiray Beach		, Florida 33446 (Zip Code)	
	(City)		(Zip Code)	•
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regis			bligations of the position.	
			·	
.Si	onature of New Registered A	laent 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>Jo</u>	<u>hn Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	<u>lly Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	Р	Jesus Fernandez	5820 Pulaski Hwy
Add			Baltimore, MD 21205
Remove			
2) Change	P	Austin Karls Sr.	5820 Pulaski Hwy
A			Baltimore, MD 21205
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendm	ent provides for	an exchange, rec	lassification on	angollation of ice	uad shaws
rovisions fo	r implementing t	he amendment if	not contained in	the amendment	itself:
OF BILDIELLO IO	plicable, indicate	N/A)			
(if not app					
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The date of each amendment(s) adoption: 8/26/2013	, if other than
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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)	
(voling 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.	
Dated_8/26/13	
Signature	
(By a director, 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 court appointed fiduciary by that fiduciary)	
Austin Karls Sr.	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

the