V02511

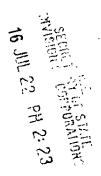
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 5, 2016

MICHELINA MOTTOLESE MICHELINA MOTTOLESE INTERIORS DESIGN,COR 17555 COLLINS AVE. UNIT 603 SUNNY ISLES BEACH, FL 33160

SUBJECT: MICHELINA MOTTOLESE INTERIORS DESIGN, CORP.

Ref. Number: V02511

We have received your document for MICHELINA MOTTOLESE INTERIORS DESIGN, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE CHECK ONLY ONE ADOPTION OF AMENDMENT BOX.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 816A00014055

16 JUL 22 | BIVIS | SEE

Articles of Amendment to . Articles of Incorporation



(Name of Corporation as currently filed with the Florida Dept. of State) MICHELINA MOTTOLESE #V02511 (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 its Articles of Incorporation: A. If amending name, enter the new name of the corporation: MMID STUDIO CORP The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 195 NE 65th Street, Miami Florida 33138 B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: 17555 Collins Ave Unit 603 (Mailing address MAY BE A POST OFFICE BOX) Sunny Isles Beach - Florida 33160 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	N. Carlotte and Ca
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	_		
Add				
Remove				
2) Change				
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	heets, if necessary			
. NEW	OFFICE	LOCATION:		
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COHP	LUNICAT	TON.		
AME	UDING	- FROM	:	
Mic	HELINA	MOTTOLES	E INTERIOR	s DESIGN (
<u>To:</u>	MMID	STUDIO	CORP.	
				
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			on, or cancellation of issued sined in the amendment itself	
	ble, indicate N/A)		med in the amendment usen	<u>.</u>
			<u>.</u>	

	June 22/ 2016	
The date of each amendment(s) a date this document was signed.	doption:	, 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 document's effective date on the D	block does not meet the applicable statutory filing requirements, this date wi epartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
/ · -	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
June 22, 2 Dated	016	
Signature	Chilelian Afottolia	
	director, 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	
appoir	nted fiduciary by that fiduciary)	
	MICHELINA MOTTOLESE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	