P9600000 5227

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OCT 29 2018

COVER LETTER

NAME OF CORPORATION: ALCHIA SCREEN PRINTING INC.

DOCUMENT NUMBER: P9600005227

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOPAKA ROBELLO

Name of Contact Person

ALCHA SCREEN PRINTING, INC.

Firm/ Company

2635 BULF BREEZE PRWY

Address

BULF BREEZE, FL 32563

City/ State and Zip Code

ALCHANIC GMAL. COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

10PAYA ROBELLO

Name of Contact Person

Area Code & Daytime Telephone Number

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

□\$43.75 Filing Fee &

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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 &

Certified Copy (Additional copy is

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

N POINTIAN INV.

	ion as currently filed with the Florida	Dept. of State)
P96000005227		
	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporati	on adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A professional co	corporated" or the abbreviation or the appropriation name must contain the
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADI</u>	DRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	OX)	
		: \ \ \ \ \ \
		as
D. If amending the registered agent and/or registe		e name of the
new registered agent and/or the new registered	l office address:	
Name of New Registered Agent		<u></u>
		10.5 1
	(Florida street address)	.
New Registered Office Address:	(Charles)	, Florida(Zip Code)
	(City)	(εφ τομέ)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		

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 Doc	
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
1) Change	D	KAIPO ROBELLE	2435 GULF BREEZE PKW
Add			UHLE BREEZE, FL 32563
<u> </u>			
2) Change			
Add			
Remove			
3) Change			·
Add			
Remove			
4) Change			
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6) Change			
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an amendment provides for an exc	hange, reclassification	, or cancellation of	issued shares,	
rovisions for implementing the am	hange, reclassification	, or cancellation of ed in the amendme	issued shares, nt itself:	
an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification endment if not contain	, or cancellation of ed in the amendme	issued shares, nt itself:	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	date will 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 amendmen by the shareholders was/were sufficient for approval.	n(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareho action was not required.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated9-77-19	
Signature (By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
OWNER, PRESIDENT (Title of person signing)	