P12000076123

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Mueller Internation	nal Exhibit Services Inc	
	MBER: P12000076123		
	les of Amendment and fee are su	bmitted for filing.	
Please return all con	respondence concerning this ma	itter to the following:	
	Timo A Becker		
		Name of Contact Persor	1
	Baur Klien & Becker P.A.		
		Firm/ Company	
	100 N Biscayne Blvd Suite 2		
		Address	
	Miami, FL 33132		
		City/ State and Zip Code	e
	cklien@worldwidelaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
Timo A Becker		at (305	377-3561
Nan	e of Contact Person		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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, F1, 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mueller International Exhibit Services Inc.

widelier international Exhibit Services inc	
(Name of Corporation as currently t	filed with the Florida Dept. of State)
P12000076123	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
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: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	t address)
New Registered Office Address:	, Florida
	'iṣy (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the purition. 7 - 5 PH 1: 42
Check if applicable	42

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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,

X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
I) Change	V 		Michael Kesler	1483 Ditmer Cir SE
Add Remove				Palm Bay, FL 32909
2) Change	<u>v</u>	_	Patrick Robinson	1168 Fay Blvd
<u>X</u> Add				Cocoa, FL 32927
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	_		
		<u>.</u>		
····			<u> </u>	
				_
				
· · · · · · · · · · · · · · · · · · ·			<u> </u>	
				_
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or ndment if not contained i	cancellation of issued in the amendment itse	<u>shares,</u> l <u>f:</u>	
				_
			······································	

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The date of each amendment(s) ad	option:	. if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	,
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09 15 20		
Dated		
Signature Mc	Ikin Xm	
	rector, president or other officer – if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court is diductary by that fiductary)	
• •	Matthias Glaser	
<u>-</u>		
•	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	

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