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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: \_\_\_\_CameraGraphicsInc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kathryn L. Deits Name of Contact Person CameraGraphicsInc. Firm/ Company 336 Golfview Road, Suite 602 Address North PalmBeach FL 33408 City/ State and Zip Code kdeits@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kathryn L. Deits (akaKatie Deits) 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: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

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n	2016 APA
NC.	ALICA S PA

CAMERA GRAPHICS, INC.

318467	rfiled with the Florida Dept. of State) المراجعة المراجع	
	· And Andrews	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new name of the corporation:		
Katie Deits & Company	The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	336 Golfview Road,Suite602	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	North PalmBeach,FL 33408	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	336 Golfview Road, Suite 602  North Palm Beach, FL 33408	
D. If amounting the registered around an item and the second and the second area.		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		
new registered agent and/or the new registered office address:		
new registered agent and/or the new registered office address:		
Name of New Registered Agent  Name of New 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change		m.a.	
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add		,	
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	g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)
	m.a.
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f an amand	lmont provides for an evolution weekersification or concellation of issued shows
i au amenu	Iment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself:
provisions	applicable, indicate N/A)
provisions (if not a	
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	March29,2016	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	farch29, 2016	
Effective date <u>if applicable</u> :	, (no more than 90 days after amendment file date)	<del></del>
	(no more man 30 days after amenament file date)	
<b>Note:</b> If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	•
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	,
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
r –	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
March2 Dated Signature	Hackryn L. Jeels	
	director, president or other officer - if directors or officers have not been	<del></del>
	eted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
#ppc		
	KathrynL. Deits	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	