404547

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone i	#)
PICK-UP	₩AIT	MAIL
(Bus	siness Entity Name	е)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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05/30/12--01005--011 **10.00

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NAY 3 1 2012 T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

MAME OF CORTORATION.	n Graphic	s Corp	0.
DOCUMENT NUMBER:	04547		<u>.</u>
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following	ng:	
Robert M. Herlin			
- "	Name of Conta	act Person	· · · · · · · · · · · · · · · · · · ·
Ellison Graphics C	Corp.		
	Firm/ Con	npany	
1400 Indiantown F	Road		
	Addre	ss	
Jupiter, FL 33458			
	City/ State and	l Zip Code	
rherlin@graphics3	inc.com		
E-mail address: (to be use		ual report i	notification)
For further information concerning this matter, please	call:		
Robert Herlin	at (561	746.6746
Name of Contact Person		Area Coc	le & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Flo	rida Depa	rtment of State:
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	ру	□\$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		Amendi Division Clifton	Address ment Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301



May 7, 2012

ROBERT HERLIN ELLISON GRAPHICS CORP. 1400 INDIANTOWN ROAD JUPITER, FL 33458

SUBJECT: ELLISON GRAPHICS CORP.

Ref. Number: 404547

We have received your document for ELLISON GRAPHICS CORP. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Karen Gibson Document Specialist Supervisor

ACT IN TENTED

Letter Number: 112A00013666

PAPAR IMENIAU STATE
DESIGNATION OF CORPORATIONS
2012 MAY 30 AM 8: 03

Articles of Amendment to Articles of Incorporation of

12 MAY 30 AM 8: 37 SERVETARIT OF STATE TALLAHASSEE ME BRIDA

Ellison Graphics Corp.

(Name of Corporation as currently filed with	the Florida Dept. of State)
40)4547
(Document Number of Corporati	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
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)	Ellison Graphics Corp.
(managamaras <u>maras para trababas</u>	P.O. Box 937
	Jupiter, FL 33468-0937
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
Signature of New Registe	ered 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change X Add Remove	PDT	Robert Herlin	1400 Indiantown Road Jupiter, FL 33458
2) Change Add Remove	VPS	Nicholas Litwin	1400 Indiantown Road Jupiter, FL 33458
3) Change Add Remove	<u>s</u>	Anthony W. Ellison	1400 Indiantown Road Jupiter, FL 33458
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		_	

E. <u>If amending or addin</u> (attach additional shee	g additional Artic	les, enter change	(s) here:		
(antich udantohai shee	is, if necessary).	(Be specific)		•	
N/A					
			<u> </u>		
	•				
				· 	
		<u>" </u>			
					
F. If an amendment pro	vides for an excha	inge, reclassificat	tion, or cancellati	ion of issued shar	es.
provisions for imple (if not applicable	menting the amen ; indicate N/A)	ament II not com	tained in the ame	enament itseif:	
N/A					
				-	
					
				····	
				<u> </u>	
-	-				
	* * *				

The date of each amendment(s) a	adoption: $7^2 20 - 20/2$
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	lopted 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	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voling group)
action was not required.	lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated	=/34/2012 ///
Signature	Nett Milland
	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
арроі	nted fiduciary by that fiduciary)
	Robert M. Herlin
	(Typed or printed name of person signing)
	President
	(Title of person signing)