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COVER LETTER

TO: Registration Section Division of Corporations : i
SUBJECT: Kolor 2010e Wrgps and Graphics LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Craig Veilleux (Name of Person)
Kolorzone wrgos and Graphizs LLC (Firm/Company)
13016 SW 85th Ave Rd (Address)
Miami, Pl. 33156 (City/State and Zip Code)
For further information concerning this matter, please call:
Craig Veilleux at (305) 251-2899 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ (additio

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	ARTICLES OF AMENDMENT	Page 1
	, TO	
	ARTICLES OF ORGANIZATION	
	OF	09 JAN -5 PM 2: 04
الما		SECTION 2: 04
Kalor Zana	Wraps and Braphies	LACIAHASSE OF STATE

(Name of the Limited I	Liability Company a Florida Limited Liabi	s it now appears on our lity Company)	r records.)	LORIDA
The Articles of Organization for this Limited Lia Florida document number	bility Company wer	re filed on 4/1 Feln # 2	1/08 6-245	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liability	company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limited	Liability Company," the	designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>	·		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	= = = = = = = = = = = = = = = = = = =			
B. If amending the registered agent and/o registered agent and/or the new registered off		address on our rec	ords, <u>enter 1</u>	he name of the new
Name of New Registered Agent:	_ Chris	topher L Sw 137th	. Gu.	stin
New Registered Office Address:	16300		PVE rida street add	
			_, Florida	33177
	((Tito)		(Zin Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. -

(If Changing Registered Agent) Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Man MGRM = M	ager , , anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRbu	Craig Veilleux	15631 SW 100 Lane Miani, Pl. 33196	Add Remove
	•		Add Remove
MGRU	Christopler L. Gustle	9061 SW 122 AVE \$104 Migmi fr 33186	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary	.)
1.	Remove existing h	MGRIM (Craig Veilleux)	
2. Add	Christopler C- Busti	n to be Sole Membe	S 5
 Dated	12/30/08,	- Juni the	PM 2: 04
	Signature of a member	or authorized representative of a member aig Veilleux	
		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00