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(Re	questor's Name)	
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COVER LETTER

TO:

	dstration Se ision of Cor			
SUBJECT.	Miami 4 Pr	int, LLC		
SUBJECT:		Name of Lim	nited Liability Company	_
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	indence concerning this matter	to the following:	
		Eriberto Morell		
			Name of Person	
		Miami 4 Print, LLC		
			Firm/Company	
	15620 NW 157th Street Road			
			Address	
		Miami Gardens, FL 33054		
			City/State and Zip Code	
		sales@miami4print.com		
For fivether in	famustian a	E-mail address: (oncerning this matter, please c	to be used for future annual report notification)	
r or runnings in	normation c	oncerning this matter, please c	au;	
Cristina de lo	s Santos		786 468-1 7 99	
	Name o	f Person	Area Code Daytime Telephone Num	iber
Enclosed is a	check for th	ic following amount:		
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & fied Copy onal copy is enclosed)
	ling Addres		Street Address: Registration Section	
_	•	orporations	Division of Corporations	
P.O	. Box 632	7	The Centre of Tallahassee	
Tall	lahassee, F	FL 32314	2415 N. Monroe Street, Suite	÷ 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miami 4 Print, LLC		· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on August 2011	and assigned
Florida document number L11000088480		, in
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "LLC" o	r the abbreviation "L.L.C."
nter new principal offices address, if applicable: 15620 NW 157th Street Road, Miami Gardens,		ami Gardens, FL 33054
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:	15620 NW 157th Street Road, Mi	ami Gardens, FL 33054
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offingent and/or the new registered office address here: Name of New Registered Agent:	ice address on our records, <u>enter th</u>	e name of the new registo
New Registered Office Address:		
	Enter Florida street address	11,211
		da
	City	Zip 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Eriberto Morell	15620 NW 157th Street Road, Miami Gardens, FL 33	30 □ Add
			□Remove
			🗃 Change
MGR	Cristina de los Santos	15620 NW 157th Street Road, Miami Gardens, FL 3.	30 □ Add
			□Remove
		ં	= Change
			Add
			Remove
			्री ☐Clienge
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ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of lote: If the date inserted in this block does not meet the applicable stat ocument's effective date on the Department of State's records.	f filing or more than 90 days after filing.) Pursuant to 605.020
e record specifies a delayed effective date, but not an ef The 90th day after the record is filed.	fective time, at 12:01 a.m. on the earlier
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pated $1/\sqrt{\frac{35}{3019}}$, $\frac{1}{\sqrt{1000}}$.	
Signature of a member of authorized rep	